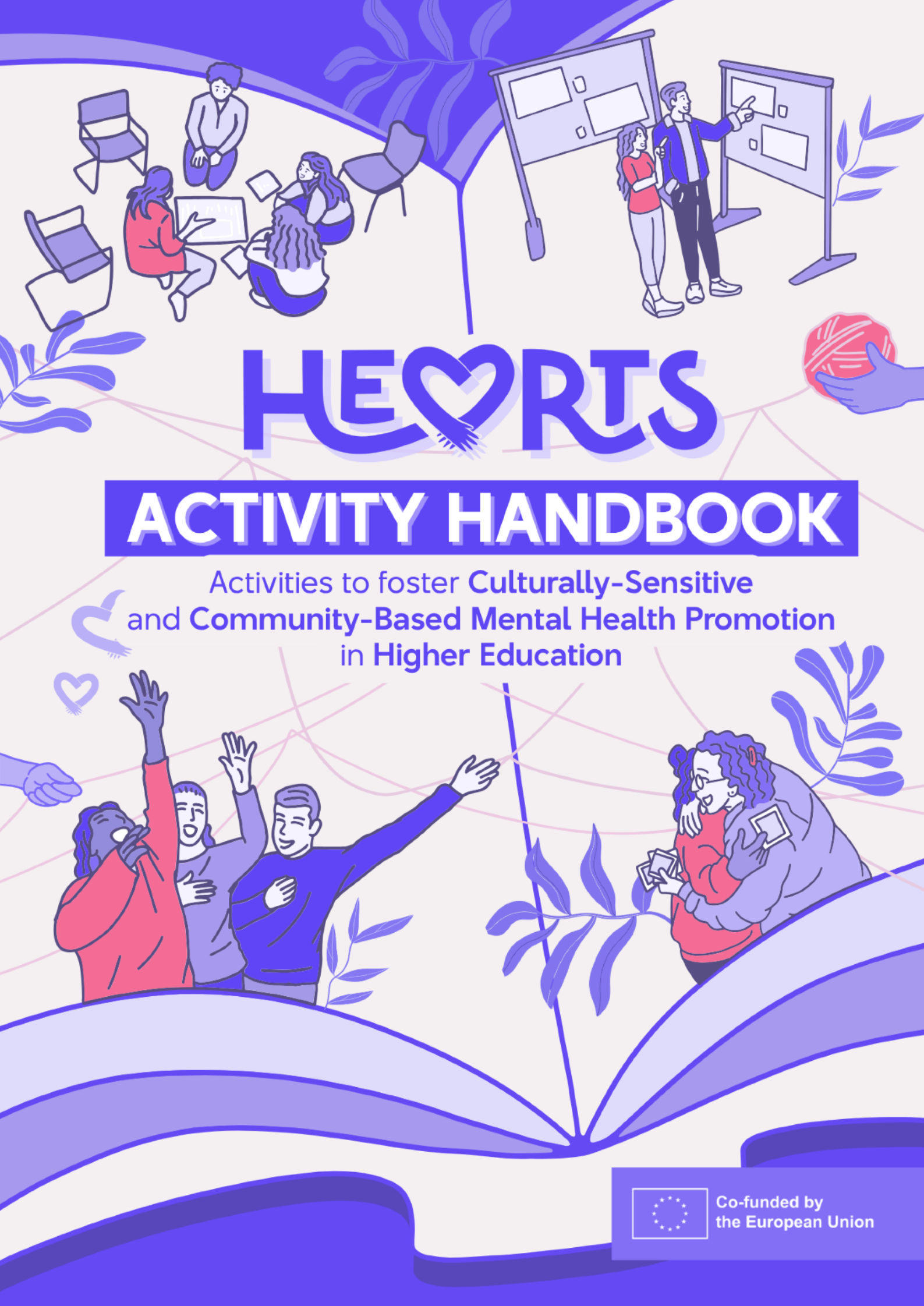

HEARTS

ACTIVITY HANDBOOK

Activities to foster **Culturally-Sensitive** and **Community-Based Mental Health Promotion** in **Higher Education**

Co-funded by the European Union

HEARTS
heartsproject.eu

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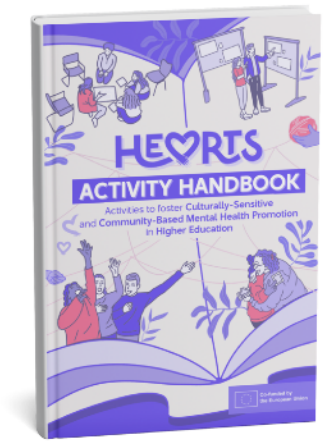
HEARTS

INTRODUCTION TO THE HEARTS HANDBOOK

Introduction to the HEARTS Handbook

The HEARTS Handbook as part of HEARTS project

The HEARTS Handbook is a collective product created within the European **HEARTS project** by ISOR-Universitat Autònoma de Barcelona (Spain), CIS-ISCTE-Instituto Universitário de Lisboa (Portugal), CRES - Universita Ta Malta (Malta), UNICA - Università Degli Studi di Cagliari (Italy), SCT | COREP Consorzio per la Ricerca e l'Educazione Permanente Torino (Italy), and IUHPE - International Union for Health Promotion and Education (France).


HEARTS
ACTIVITY HANDBOOK
Activities to foster Culturally-Sensitive and Community-Based Mental Health Promotion in Higher Education

The Handbook collects and presents **training activities proposals for the promotion of mental health in universities and Higher Education contexts**, which were developed within the HEARTS project and which constitute the heart and main purpose of the project. The HEARTS partners have conceived the five Learning Paths and the contents of this volume, through many phases of scientific and methodological dialogue and thanks to careful direct piloting in the universities of Turin, Cagliari, Valletta, Lisbon and Barcelona.

HEARTS: Higher Education Action Response for Trauma Support is a European project that aims to promote mental health in higher education through inclusive, culturally sensitive, and community-based strategies. Using a participatory and transdisciplinary approach, the project develops innovative, contextualised and evidence-based tools designed to respond to the specific needs of students and university staff, with a particular focus on vulnerable or under-represented groups. The project draws on international health promotion frameworks, such as the Okanagan Charter and the IUHPE guidelines, to ensure its long-term sustainability and institutional impact.

This Handbook, ***HEARTS Activity Handbook: Activities to Foster Culturally-Sensitive and Community-Based Health Promotion for Trauma Support in Higher Education***, is the second of three main products developed within the framework of the HEARTS project, designed as interrelated components of the same methodological architecture.

All project results can be downloaded free of charge from the HEARTS website: **https://heartsproject.eu/results**.

Prior to this publication, the consortium produced the ***HEARTS Foundation Bricks Report: Mental Health Needs Assessment of Five European Higher Education Institutions***, a comprehensive diagnosis of mental health promotion in the universities participating in the project: Universitat Autònoma de Barcelona (Spain), Iscte – Instituto Universitário de Lisboa (Portugal), L-Università ta' Malta (Malta), Università degli Studi di Cagliari (Italy) and COREP – Consorzio per la Ricerca e l'Educazione Permanente Torino (Italy). This report focuses on barriers to access, institutional gaps and the experiences of students and university staff, especially those belonging to vulnerable or under-represented groups.

The findings of this publication served as the empirical and conceptual basis for the co-design of the training activities presented in this Handbook. These proposals were piloted in real university contexts at the five partner institutions, in close collaboration with students and staff. The resulting experiences have been systematised into five learning paths, each accompanied by a set of adaptable and contextualised activities aimed at promoting mental health from culturally sensitive and community-based approaches in higher education.

The process will culminate in the development of the ***HEARTS Guide: Guide for the Introduction of Culturally Sensitive and Community-based Health Promotion for Trauma Support in Higher Education***, a resource aimed at the institutional and sustained implementation of mental health promotion strategies.

All the activities presented are based on the HEARTS Method, which combines inclusion, diversity, cultural sensitivity and a community-based approach with a participatory, iterative and transdisciplinary methodology. Each proposal has been designed to respond in a contextualised way to the real needs of those who make up university communities, with an emphasis on including perspectives that are frequently underrepresented in academic discourse.

What do you find in the HEARTS Handbook

This Handbook serves as a guide for universities and professionals who aim to implement mental health promotion interventions specifically targeted at university students and staff in Higher Education contexts. It is particularly designed for those committed to fostering inclusive and community-based mental health practices within their institutions.

The interventions proposed by the HEARTS project operate on multiple levels: they **enhance knowledge**, fostering personal awareness of the topic and general theoretical understanding; they **promote mental health**; and they **create a culture of mental health**, reducing stigma around the subject.

These training interventions generate both personal and collective awareness of how individuals and the academic environment as a whole promote the well-being of staff and students. They also provide information on the resources available within the academic

context to address mental health needs in particular. Furthermore, HEARTS training interventions inherently act to promote participants' health, both directly by generating well-being and indirectly by providing salutogenic strategies for daily personal and professional use. Specifically for professionals, the **HEARTS Handbook serves as both a theoretical framework and an operational tool** for understanding methodologies and specific activities to conduct mental health promotion training.

The Handbook is structured into two main parts.

The first part provides a **common theoretical framework and an ethical-cultural perspective for professionals** from diverse professional, disciplinary, and methodological backgrounds who intend to deliver HEARTS activities. It includes an **introduction** to the topic of health promotion in the section "**The Health Promotion Framework"** by the International Union for Health Promotion and Education (IUHPE), which provides an overview of health promotion principles, from the Ottawa Charter to the Geneva Charter for Well-being, and details mental health promotion in academic settings, guided by frameworks like the Okanagan Charter, promoting holistic, campus-wide interventions.

This section also provides a reflection on the principles of ***Diversity, Equity, and Inclusion (DEI)*** that inspire the HEARTS project and all the training proposals contained in the HEARTS Handbook, contributed by Universitat Autònoma de Barcelona (UAB). It presents diversity as a relational and situated dimension. It traverses all of us: facilitators, students, teaching staff and the entire university community. It also affects our experiences and positions within power structures. This intersectional and community-based perspective serves as the foundation for our actions to promote inclusive and equitable mental health practices in university settings.

The second part delves into the core of the HEARTS training proposal, presenting **five Training Proposals** (learning paths) which were designed and tested by each of the HEARTS partners in their respective universities (Barcelona, Lisbon, Cagliari, Turin, Valletta) with **three different target groups: staff, students and a mixed group of staff and students**.

The Training Proposals are presented with a **common structure:**

- including a **description** of **each proposal** in its entire **progressive development** and
- a detailed **description** of one of its key activities.

Each **Training Proposal** offers **three** specific **options**, one for each target audience (staff, students, and a combined staff/student group). These three specific proposals within each Training Proposal may be similar or differ in individual exercises or overall structure. Annexes to each Training Proposal include useful materials for conducting certain exercises or activities, such as tables or lists of questions.

The second part of the HEARTS Handbook concludes with **a list of useful exercises for opening, warm-up, or closing activities**. These exercises, designed and presented by UAB, enrich each of the 5 HEARTS project Training Proposals and offer facilitators the option to use one of these exercises as an alternative or addition to what is already indicated in each Training Proposal. All exercises were tested by UAB during the experimentation phase of the HEARTS project at the University of Barcelona.

For whom is the HEARTS Handbook intended

The **HEARTS Handbook** is a manual **designed for those who intend to activate training interventions for mental health promotion within universities and higher education institutions**, it is especially conceived for professionals who will directly conduct the interventions. However, it is also a useful tool for decision makers who can evaluate the opportunity of such an intervention; in the manual they can find a reflection on the theme and on the ethical and cultural perspective according to which the action of promoting mental health proposed by the HEARTS project is placed.

The professional figures to whom the manual is addressed are diverse and belong to different sectors and disciplinary fields. In the health field there are **health promoters, psychologists, counselors, well-being experts, and specific experts in techniques such as mindfulness.** In the social sciences, the Manual is addressed to **sociologists, anthropologists.**

In the field of education to **experts in non-formal education** and in the field of culture to **experts in participatory arts and social theatre**. **Interdisciplinary profiles and experts in group and community approaches** are particularly welcome, as well as professionals who have completed training or obtained certification in cultural competence, diversity and inclusion, or within the framework of social justice.

Each **Training Proposal indicates the type of professionals who can deliver the training proposal**, in relation to both the discipline the Training Proposal refers to (sociology, psychology, social and community theatre, health promotion, etc.) and to specific methodological skills (Photovoice, Mindfulness, etc.) or languages (theatre, etc.) that are used in the training proposal. However, all five different Training Proposals require professionals to have some necessary basic requirements regarding the fact that the training intervention is a group intervention, with active methodologies and on sensitive issues that can trigger strong emotional involvement.

HEARTS Facilitator Profile

Therefore, **to successfully conduct HEARTS trainings,** it is necessary that professionals have:

1) **experience and skills in leading groups and in facilitating discussion among participants** according to the principle of respect, listening and non-violent communication;
2) **the ability to conduct 'active' exercises**, which include the overall activation of the person (body, mind), through social interactions in group and subgroup, even informal and often creative;
3) **the ability to manage sensitive, even emotionally challenging topics** and to recognize, welcome and manage any emergence of intense emotional reactions and to facilitate the referral of people in difficulty to the structures and professionals designated to welcome them (dedicated university services, public socio-health services, professional psychologists or psychotherapists).

Five Learning Paths

To ensure the effective use of the Handbook as a health promotion resource, the HEARTS Handbook should not be seen as a mere catalogue of exercises. Instead, it presents five Training Proposals – Learning Paths – each distinct in its disciplinary field, designed for a specific, progressive development of the intervention. Readers of the HEARTS Handbook are strongly advised to avoid selecting individual exercises from a Training Proposal for group use and are strongly encouraged to **follow the comprehensive intervention proposal in the order and according to the instructions provided by the Learning Path** itself. Implementing single exercises or a mixed selection of them does not align with the objectives of this Handbook and will not guarantee the achievement of the primary goal of promoting mental health among participants.

The five **Training Proposals address the challenges of the HEARTS project from the perspective of the health promotion framework illustrated in this volume by IUHPE**. Therefore, the five Training Proposals presented in the Handbook share the same goal of offering a training proposal—in the form of an active workshop—for three different target groups (students, staff, and a mixed group of staff and students). Each proposal is based on a coherent theoretical and methodological approach, as indicated by the partner who designed it. The workshops for staff and the mixed staff/student group are 8 hours in duration (which can be organized over one or more days), while the workshop for students is 16 hours, adaptable to half-day sessions or weekly two-hour meetings. Specific guidance on managing the workshop's timeline is provided by each Learning Path from the partners.

Health Promotion through Sociology and Creative Approaches (HPSCA)
Universitat Autònoma de Barcelona (ISOR UAB)
Health Promotion through Theatre (HPT)
Social Community Theatre Centre (SCT) | COREP
HEARTS
METHOD
LEARNING PATHS
Health Promotion through Photovoice (HPP)
University of Cagliari (UNICA)
Health Promotion through Social Inclusion (HPSI)
CIS-ISCTE | Instituto Universitario de Lisboa
Health Promotion through Mindfulness & Resilience (HPMR)
Centre for Resilience and Social and Emotional Health (CRES-UM), University of Malta

How the Learning Paths were designed

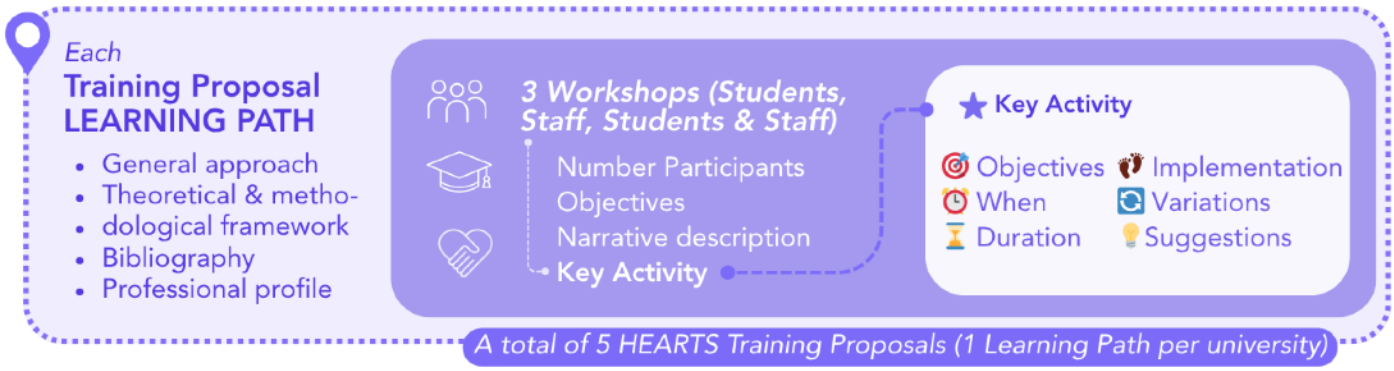
The creation of the Training Proposals stems from a process of scientific and **methodological discussion** among project partners, a typical feature of European Erasmus+ projects, **combined with action research** conducted in each country. In the case of HEARTS, this journey unfolded in three phases.

In the **first phase,** partners collectively redefined the project's scope, placing the objective of trauma support (to which the acronym "HEARTS: Higher Education Action Response for Trauma Support" refers) within the broader context of health promotion. During the **first in-person meeting in Turin (Italy) in June 2024,** partners deepened their mutual understanding of theoretical frameworks and disciplinary backgrounds - ranging from psychology to sociology, from health promotion to social and community theatre - and presented their own training methodologies, some of which had already been tested in previous training activities, through active engagement and direct experimentation by the meeting participants.

In the **second phase**, **each partner** developed their **own training proposal,** one for each of the three target groups (students, staff, staff + students). They then initiated an accreditation process for their proposal within their own academic context, engaging with staff training managers or directly with rectors, vice-rectors, or fellow lecturers to assign training credits to students. Broad-spectrum engagement activities were undertaken in classrooms and among staff to reach target audiences and ensure wide participation in the subsequent experimental phase. In this pilot phase, each partner conducted three workshops (one 16-hour workshop for students, one 8-hour workshop for staff, and one 8-hour mixed student and staff workshop), which were led by a pair of facilitators—often the original designers of the training proposal—in the presence of one or more observers who tracked the proposal's impact on participants.

In the **third and final phase**, partners met in person in **March 2025** in **Lisbon (Portugal)** to present the training proposals experimented within their respective academic contexts and to share lessons learned from observation and participant feedback. Following this discussion, each proposal was revised, and each partner finalized the design of their training intervention and organized it into the common structure used in this Handbook, provided by SCT Centre | COREP, the partner responsible for drafting the Manual, which collected all materials and supervised the editing of the HEARTS Manual in dialogue with the leading partner and the entire partnership.

The Learning Path's structure



The *5 Training Proposals* presented in the HEARTS Handbook have the same aim of **providing a training proposal in the form of an active workshop**, for strengthening well-being, developing personal and collective health promotion skills, and disseminating correct knowledge on the main concepts related to mental health and for information on health services available in the context. Each Training Proposal, however, is distinguished by a coherent and specific theoretical and methodological approach.

Each *Training Proposal* is therefore made up of two parts. In the first one, the general approach, the **theoretical and methodological framework** are presented, a reference bibliography is provided, and the professional profile and competencies requirements for facilitators who wish to use and conduct the training according to that specific Training Proposal are indicated (these requirements are articulated into professional background, competencies, experience).

In the second part, there is a **detailed description of the three workshop training proposals for each of the target groups** (students, staff, staff+students). The three workshop proposals may coincide or may have partial or substantial differences in exercises and progressive structure, as conceived by each partner, but they maintain the same methodological and theoretical reference.

The description of *each Workshop* is developed as follows:

1) target indication (minimum and maximum **number** of **participants**);
2) a list of the five **main objectives** of the workshop;
3) a **narrative description** of the **workshop's structure** in its different progressive phases (divided into work sessions);
4) the detailed description of a **Key Activity** of the workshop.

The **description** of the *Key Activity* is articulated into:

1) **objectives**;
2) indication of **when** the key activity should be carried out in the workshop;
3) the **duration** in minutes of the key activity;
4) **implementation**, i.e., a detailed description of what needs to be done;
5) suggestions in relation to **variations** or adaptations in the implementation of the key activity to respond to specific participant conditions (health, cultural identity, language, etc.).
6) Finally, the description of the key activity contains at point 6, **suggestions** for **trainers/facilitators** to make the implementation of the key activity more effective and to manage any challenges that might emerge during its implementation.

List of ice-breakers, warm-up and cool-down exercises

Alongside the Learning Paths, there is a list of **warm-up and cool-down exercises**, proposed by UAB, that can be used in any learning path as an integrative activity in the warm-up and cool down phases. These activities fulfil complementary functions that enrich both the learning process and the emotional experience of the participants. At the beginning, they stimulate curiosity, promote interpersonal connection and generate a receptive attitude towards the content of the session. In the final phase, they help to summarise key ideas, encourage personal reflection on the experience and facilitate the restoration of emotional balance before returning to the daily routine. Their incorporation into all training programmes provides a coherent structure that promotes involvement, inclusion and a sustained impact over time.

General guidelines on handling sensitive topics

Dealing with mental health topics might arouse intense emotional experiences in participants; **it is important that facilitators are ready to recognize any need for psychological support** and are able to connect those in need with the appropriate services and professionals both within the University and in the local territorial context of public or private services.

This implies an attentive and informed attitude towards the diversity of participants' backgrounds, identities, experiences and cultural origins. Facilitators should approach their role with awareness and sensitivity, adopting inclusive and trauma-sensitive pedagogical practices to create spaces where everyone (regardless of their cultural, religious, gender or functional diversity background) feels recognised, listened to and welcomed with care.

For this reason, in the experience of the HEARTS project, HEARTS activities were designed and selected based on the prior mapping of mental health services available at each participating university (***HEARTS Foundation Bricks Report***). This mapping is an integral part of the three workshops and of the Learning Path we propose. Therefore, conducting this mapping beforehand (or ensuring that it is available for each university) is essential for the successful multiplication and adaptation of the learning paths across different contexts. Mapping the public mental health services available around University is also strongly recommended.

The **knowledge of available mental health services** is a key element of health promotion and empowerment not only on an individual level. As it happened during

HEARTS workshop pilot phase, participants in the HEARTS activity became an important source of knowledge within their peer context and were able to spread knowledge on concepts and specifically of services already available in the university, often not so well known by students and staff themselves.

At the beginning of each session, it is useful to collectively agree on some operating guidelines that contribute to creating a climate of trust, care and confidentiality. These may include aspects such as voluntariness, the right to say no and the importance of listening to each other. It is advisable to keep these guidelines in mind throughout the process.

Facilitators should be open to reading the present moment and adapting to any needs that may arise. This may involve offering reflective breaks, moments of personal writing or the possibility of withdrawing if necessary, respecting each person's pace.

The session can begin with a warm-up or icebreaker and end with an emotional or symbolic closing moment: from a talking circle to a clearing practice or a round to share how we are feeling.

When artistic languages such as theatre, drawing or storytelling are used, it is important to recognise that they can awaken personal memories or emotions. A good framework and careful feedback are key to sustaining the experience with emotional safety.

Ethical considerations should be acknowledged, including the need to consult with or follow procedures established by each institution’s ethics committee before implementing the activities.

HEARTS

HEALTH PROMOTION FRAMEWORK

The Health Promotion Framework

Health promotion as it is practiced today is grounded in the **Ottawa Charter**[1], which defines the field as follows: *"Health promotion is the process of enabling people to increase control over, and to improve, their health. To reach a state of complete physical, mental and social wellbeing, an individual or group must be able to identify and to realize aspirations, to satisfy needs, and to change or cope with the environment".*

More recently and in light of the many issues threatening equity in health and well-being today, the **Geneva Charter for Well-being** (2021) by WHO proposed a 21st Century Health Promotion Response that builds on earlier texts. The role of health promotion is to catalyse and support well-being by:

- "Ensuring that people and communities are enabled to **take control of their health and lead fulfilling lives with a sense of meaning and purpose**, in harmony with nature, through education, culturally relevant health literacy, meaningful empowerment and engagement.
- Enabling, mediating and advocating for a **unifying approach to creating well-being societies** by shaping the determinants of health in all settings.
- Ensuring that promotive, preventive, curative, rehabilitative and palliative **health and social services are of high quality, affordable, accessible and acceptable** and are provided according to needs, especially for those often left behind." (p. 4)

With respect to mental health promotion specifically, IUHPE (2021) has articulated key areas for action[2], in light of recognition that mental health at the populational level has been a critical issue for some time, and particularly post-pandemic. Mental health promotion aims to strengthen protective factors through skills, resources and protective environments. The settings of daily life, such as universities and the broader communities in which they are embedded, are ideal targets for interventions to protect and promote the mental health of young adults.

Interventions aiming to protect or promote mental health can take many forms, as the Learning Paths of the HEARTS Project, documented here, illustrate – the activities described are context-dependent and rely on existing resources. This contributes to their relevance to universities and their community partners, and to the sustainability of the activities over time.

There are, however, frameworks that can guide the interventions in order to promote best practices and efficacy, in addition to lessons learned from an important body of work on health promotion actions in higher-learning settings (see, for example, Araujo et al, 2021[3]); a well-known framework to guide this work, namely the **Okanagan Charter**[4]

[1] World Health Organization. (1986). Ottawa Charter for Health Promotion. https://iris.who.int/handle/10665/349652

[2] International Union for Health Promotion and Education. (2021). Critical Actions for Mental Health Promotion.

[3] Araujo Faria, M. G., Fernandes, R. C., Gallasch, C. H., & Alves, L. V. V. (2021). Contributions of the health-promoting universities' movement: An integrative literature review. Journal of Education and Health Promotion, 10(1).

[4] Okanagan Charter: An International Charter for Health Promoting Universities & Colleges. (2015). https://healthpromotingcampuses.squarespace.com/okanagan-charter

(2015); and a rich **national and global network of health-promoting universities**[5]. The approach advocated by the Okanagan Charter is a holistic one – e.g. isolated interventions and superficial changes are not conducive to sustainable change. Campus-wide efforts, buy-in from university administrators, faculty, students and support staff, community-based initiatives, are required to create and maintain a truly health-promoting setting.

While not all learning paths experimented throughout the HEARTS project have this broad aim, they can complement such efforts where they exist, and they can be a starting point where such an approach has not been adopted. Being intentional about how HEARTS can complement existing initiatives or build new capacity is recommended – it can allow for linkages that would otherwise not be manifest, and be taken into account in the evaluation – the latter can ensure that new initiatives are adequately monitored and assessed in ways that can contribute to the literature on what works and what are the basic requirements to create health-promoting settings.

In addition, any health promotion action should be anchored in core knowledge and values of health promotion in general, and mental health promotion specifically. The International Union for Health Promotion and Education (IUHPE) has developed a **framework of Core Competencies**[6] and professional standards for health promotion in 2016 (revised in 2024) and its Global Working Group on Mental Health Promotion published, in 2022, core Knowledge Competencies specific to mental health promotion[7].

While not all staff who engage with the HEARTS project need be career health promotion professionals, a common set of principles and knowledge competencies can help ensure that best practices are observed and any harm or unintended outcomes are avoided. For example, knowledge of the determinants of health/mental health; cultural competence; creating activities that are empowering/participative, equitable, and that foster partnerships.

All of these approaches and frameworks are meant to be **adapted to local contexts, needs and resources** – they do not consist of a checklist or a concrete list of steps to follow, and thus allow for great flexibility and creativity in implementing a HEARTS or other mental-health promoting initiative, while being grounded in professional consensus and evidence.

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[5] See, for instance, the International Health Promotion Campuses Network (https://www.healthpromotingcampuses.org/) and the Red Iberoamericana de Universidades Promotoras de Salud (https://rmups.org/)

[6] International Union for Health Promotion and Education. (2024). IUHPE Core Competencies and Professional Standards for Health Promotion - revised

[7] International Union for Health Promotion and Education. (2022). Mental Health Promotion Knowledge Competencies.

HEARTS

DIVERSITY, EQUITY AND INCLUSION

Diversity, Equity and Inclusion

Within the framework of the HEARTS project, diversity is not approached as a fixed, essentialist or exclusively cultural category. We understand it as a relational and situated dimension that cuts across identities, life trajectories, corporealities, experiences and multiple frames of reference. This perspective allows us to move away from both visions that absolutise difference and those that, in the name of equality, tend to render it invisible. Both positions hinder the construction of truly inclusive and fair environments.

Denying differences (under discourses such as 'all people are equal') does not eliminate structural inequalities or the mechanisms of exclusion that operate in university contexts. On the contrary, it prevents us from naming, analysing and transforming them. For this reason, the HEARTS approach rejects both cultural blindness and over-culturalisation: that is, avoiding both reducing all tensions to cultural factors and denying their existence and impact. Thus, we are committed to inclusive mental health promotion solutions: recognising these differences and fostering the creation of spaces and conditions of equity that allow for the full participation of all people.

Therefore, an intersectional approach is key to understanding how different axes of inequality (such as origin, class, gender, sexuality, functional diversity, mental health…). These intersections give rise to specific forms of underrepresentation, barriers to accessing mental health services, stigmatisation of mental distress and a lack of institutional recognition of experiences related to mental health challenges or situations of exclusion. In this sense, addressing diversity from a community-based approach allows mental health promotion strategies to emerge from the university community itself, recognising its knowledge, practices and support networks.

Furthermore, diversity is neither static nor universal. Its perception depends on the context, relational positioning and power dynamics that permeate each situation. What is considered a 'minority' in one environment may be dominant in another and vice versa. Thus, diversity arises precisely from the relationships we establish with others and our place within them. Therefore, there is no diversity without a situated perspective.

> The **situated perspective** recognises that all forms of knowing, acting or communicating start from a specific place (social, cultural, historical and bodily) and that there is no such thing as neutrality. It involves becoming aware of where we are speaking from and how our positions influence what we see, say and provoke. As facilitators, it is essential to recognise this perspective and maintain a reflective attitude about our own positioning, as our experiences and opinions condition the way we accompany group and educational processes.

At HEARTS, we believe that diversity is, or should be, a natural and fundamental characteristic of educational spaces, not an exception or a problem that needs to be corrected or adapted. That is why we advocate for methodologies that go beyond simply recognising differences: we promote collective reflection, care and institutional transformation to create real conditions that guarantee inclusion and fair participation for all.

How are the concepts related?

- **Diversity** is the starting point: it acknowledges that people vary by background, social positions, bodies, experiences and material conditions. It is not an add-on but rather a structural fact of any social space.
- **Equity** is the ethical and political response to this diversity. It means understanding that since all people do not begin with the same conditions, it has, therefore, to involve redistribution of resource, power, and opportunity to make participation achievable on fair terms.
- **Inclusion** is a conscious practice that changes settings in such a way that everybody can be present and be fully participative, most importantly the ones who have been historically silenced or oppressed, and feel recognized.

HEARTS

LEARNING PATHS OVERVIEW

Learning Paths Overview

Workshop 1: **Students**
Workshop 2: **Staff**
Workshop 3: **Students & Staff**

Health Promotion through Sociology and Creative Approaches (HPSCA)

Universitat Autònoma de Barcelona (ISOR UAB)

Workshop 1: Students	Workshop 2: Staff	Workshop 3: Students & Staff
Sociology on Stage	*Balancing Professional Life with Ikigai*	*Exploring Identity, Loss and Inclusion*
★ Activity *HEARTS Wheel*	★ Activity *Ikigai for Mental Health*	★ Activity *Death Café*

Health Promotion through Theatre (HPT)

Social Community Theatre Centre (SCT) | COREP

Workshop 1: Students	Workshop 2: Staff	Workshop 3: Students & Staff
Health Challenges, Help Seeking & Health Resources	*Self-awareness, Health Needs & Daily Saluto-genic Strategies*	*Health Personal Experience & Health Core Concepts, Needs & Strategies*
★ Activity *Characters and Health*	★ Activity *What Do I Do in My Life to Feel Good?*	★ Activity *Talking about Health through Objects*

Health Promotion through Social Inclusion (HPSI)

CIS-ISCTE | Instituto Universitario de Lisboa

Workshop 1: Students	Workshop 2: Staff	Workshop 3: Students & Staff
Social Inclusion Competences	*Social Inclusion Practices*	*Wellness-Fostering Health Promoting Settings in HE*
★ Activity *Self-awareness through the Line Exercise*	★ Activity *Inter-group Relations with the Colors Exercise*	★ Activity *Mapping Mental Health Barriers, Resources & Solutions*

Health Promotion through Mindfulness & Resilience (HPMR)

Centre for Resilience and Social and Emotional Health (CRES-UM), University of Malta

Workshop 1: Students	Workshop 2: Staff	Workshop 3: Students & Staff
Mapping Risks and Resources	*Health and Wellbeing Wheel*	*Mindfulness through Music*
★ Activity *Removing Risks & Barriers to Foster a Safe, Inclusive & Caring Campus*	★ Activity *Health and Wellbeing Wheel*	★ Activity *Mindful Listening, A Journey through Sound*

Health Promotion through Photovoice (HPP)

University of Cagliari (UNICA)

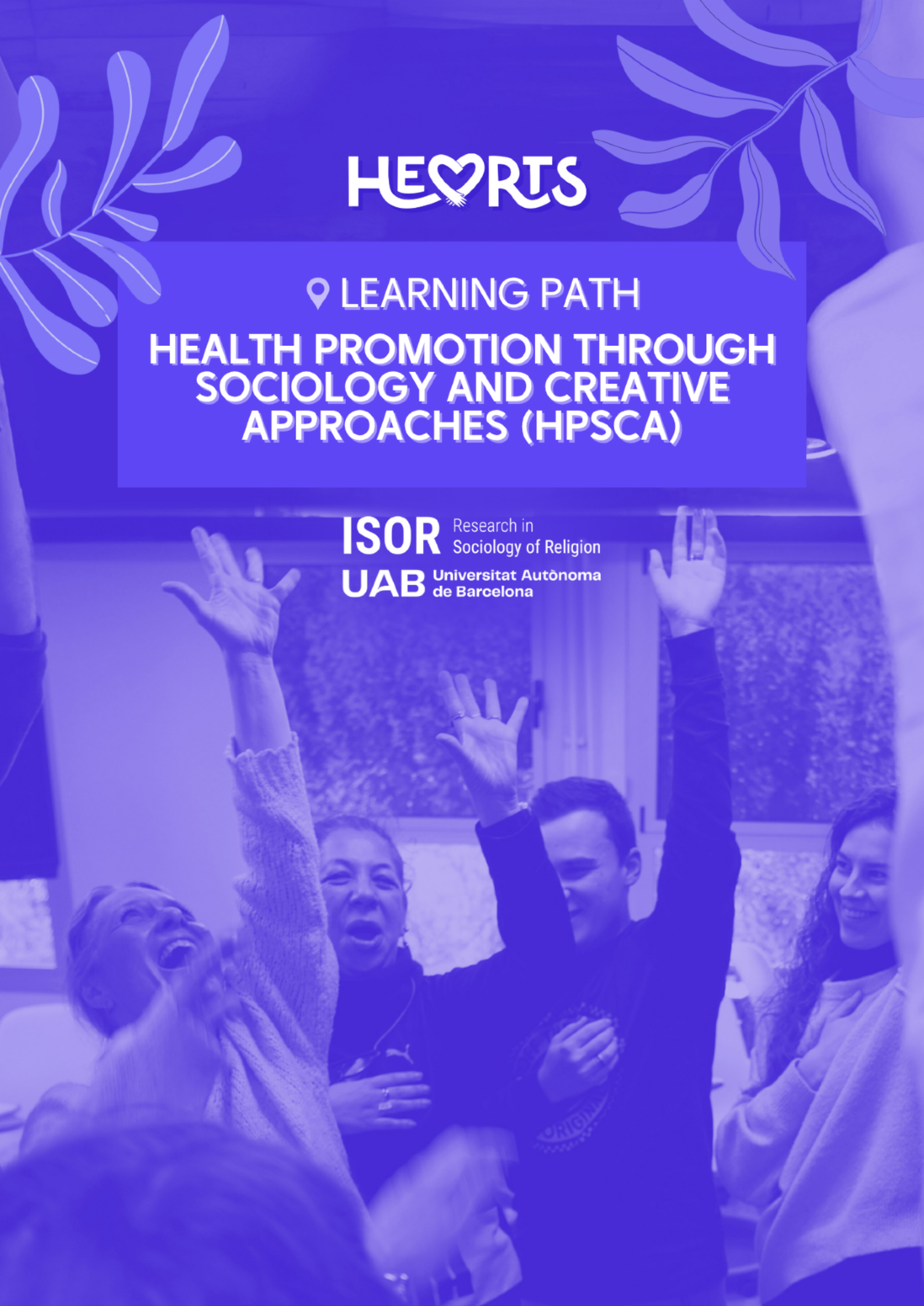
Workshop 1: Students	Workshop 2: Staff	Workshop 3: Students & Staff
The Language of Images	*Voices for Change, the Power of Advocacy*	*Mindfulness Perspectives in Dialogue*
★ Activity *Photovoice*	★ Activity *Advocacy through the Photovoice Exhibition*	★ Activity *Different Yet the Same*

HEARTS

LEARNING PATH

HEALTH PROMOTION THROUGH SOCIOLOGY AND CREATIVE APPROACHES (HPSCA)

ISOR Research in Sociology of Religion
UAB Universitat Autònoma de Barcelona



Health Promotion Through Sociology and Creative Approaches (HPSCA)

Learning Path by Universitat Autònoma de Barcelona

General approach of the learning path

The learning path ***"Health Promotion through Sociology and Creative Approaches (HPSCA)"*** offers an innovative approach to inclusive mental health in higher education. Based on sociological reflection and creative pedagogy, this pathway involves non-formal education, embodied practices and an intercultural and community-based perspective.

Theoretical and methodological framework

This interdisciplinary itinerary addresses mental health in higher education from a sociocultural perspective. Drawing from selected topics of the HEARTS framework, such interreligious dialogue, critical heritage studies, ritualism of grief and mourning, identity construction, gamification and visual thinking, it integrates non-formal education with embodied, creative and participatory approaches.

The activities have been specifically designed to respond to and include individuals in more vulnerable situations (such as those from minority backgrounds, with functional diversity, psychological challenges, diverse life histories or identity-related diversities).

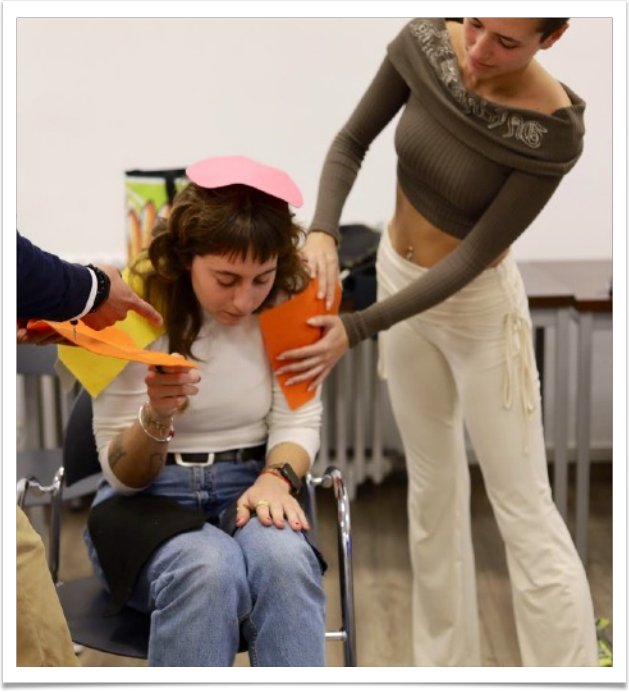
The learning path emphasizes and invites reflection on themes such as **death, grief, identity and both cultural and religious diversity,** recognizing that emotional wellbeing is shaped not only by individual experience, but also by social norms, symbolic systems and inherited narratives.

Working with these themes provides a valuable framework for supporting emotional processing, reducing internal conflict and promoting self-acceptance. This is particularly relevant in higher education, where many students experience significant loss (e.g. the death of a loved one or pet, migration, ruptures in identity) for the first time. **Distinguishing between grief** and **depression** is key for appropriate support. While grief is a natural and adaptive response marked by waves of sadness and reflection; depression involves persistent hopelessness and impaired functioning. However, unresolved or complicated grief may evolve into clinical depression, making early identification and group-based support crucial. In this context, symbolic and body-based methods allow students to express losses

and relational dynamics. These representations help distinguish between natural mourning processes and pathological symptoms, while engaging in embodied, non-verbal forms of healing. Addressing identity-related or cultural aspects of grief can also reduce internal tensions and foster emotional inclusion in moments that are often hard to verbalize.

One of the core methodologies of this path is ***Death Café.*** This dynamic creates a space where participants can talk openly about death, loss and mourning. Inspired by the work of **Bernard Crettaz** and adapted by **Jon Underwood**, the *Death Café* invites people into reflective conversations in a safe, inclusive and non-clinical setting.
These sessions bring to light personal and cultural narratives around **death that are often silenced in academic settings.** This type of activity acknowledges the emotional dimension of university life, while fostering interreligious and intercultural dialogue on how we understand, ritualize and experience grief in its multiple forms.

In dialogue with this approach, the learning path incorporates **theatre-based tools inspired by the Theatre of the Oppressed** and **Image Theatre**, developed by **Augusto Boal**. These methods draw on exercises involving the body, gesture and symbolic action to externalize internal conflicts and social roles. Participants explore situations of tension, resistance or ambiguity through performative representation, inviting them to reflect on emotionally complex or culturally sensitive topics: bringing to expression to what is often difficult to express in words.



The path includes **Systemic Movements,** inspired by family systems theory,particularly the sculpting techniques developed by Virginia Satir (Satir et al., 2019) and also by performative Hellinger's Systemic Constellation Work (Hellinger & Ten Hövel, 2001). Through human sculptures and spatial organization, participants reflect on family legacies and identity-shaping dynamics.
This methodology cultivates awareness of trans-generational influences and symbolic repair, linking the personal to the collective and to wider stories of memory, silence and cultural inheritance.

Play is used throughout the learning path as both structure and method. Activities integrate elements of **serious play** and **gamification** to foster engagement, emotional safety and co-creation.

Overall, the methodology is not oriented toward therapeutic intervention, but toward generating spaces for **critical and transformative learning**. It creates the conditions for participants to examine the social construction of identity, care and mourning and to reflect on how these dimensions operate within the structures of higher education and beyond.

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Satir, V., Banmen, J., Gerber, J., & Gomori, M. (2019). The Satir Model: Family Therapy and Beyond. Science and Behavior Books.

Underwood, M., & Fenge, L. A. (2021). Death Cafés: A Tool for Teaching, Learning and Engaging with Death. Palgrave Macmillan.

Facilitator's professional profile and requirements

- **Professional background:** Preferably, but not limited to, professionals from sociology, psychology or anthropology and/or with experience in participatory learning, non-formal educational methods and mental health. Interdisciplinary and community-based profiles are especially welcome.
- **Skills**:
    - Ability to manage emotionally sensitive topics (grief, trauma, identity, mental health).
    - Basic ability to identify signs of emotional distress and assess whether a participant could benefit from referral to professional support services. Although facilitators are not expected to provide clinical care, they should be alert to detect urgent mental health needs and activate appropriate support channels within the institution if necessary.
    - Active and empathetic listening.
    - Group facilitation skills in diverse cultural and emotional contexts.
    - Creativity and adaptability in non-formal educational settings.
- **Experience:**
    - Experience facilitating group processes through creative, participatory or non-formal methods.
    - Confidence in addressing emotionally sensitive topics with care and openness.
    - Ability to adapt to diverse cultural and emotional contexts and foster inclusive dialogue.
    - Familiarity with higher education, mental health, arts-based practices or intercultural work is a plus, not a requirement.

Health Promotion through Sociology and Creative Approaches

Workshop 1 for Students: Sociology on Stage

Target group

From 15 to 70 students. Ideally, each facilitator will be responsible for around 25 participants. The larger the group, the more facilitators will be needed, following this ratio.

Main objectives of the workshop

- ✓ Explore the diversity of identity constructions and how personal and social factors shape individual experiences.
- ✓ Promote **awareness of mental health promotion services** within the university, encouraging students to recognise available resources, challenge stigma and engage actively with support systems.
- ✓ Foster a **supportive group environment** that encourages trust, connection and the **creation of safe spaces** for expression, recognising the collective and relational dimensions of mental health.
- ✓ Encourage meaningful engagement with complex emotional experiences such as **conflict, emotional complexity and grief** in a culturally sensitive way.
- ✓ Acknowledge and **celebrate the diversity** of perspectives on **identity and care**, fostering inclusive dialogue and shared reflection across different cultural, spiritual and social backgrounds.

Workshop itinerary

The workshop is composed of **16 hours**, articulated as follows:
4 in-person sessions of 4 hours each
Approximately **9 hours of autonomous work** carried out in small groups (4–6 participants)

Session one introduces the HEARTS project and outlines the goals, structure and participation guidelines of the workshop. Participants are invited to take part voluntarily, with an alternative task available for those who prefer individual work. The central activity focuses on the **creation of a fictional character that represents two dimensions of identity: personal and community**. The use of a fictional character allows participants to explore complex and emotionally sensitive topics related to mental health without directly exposing their own experiences. This symbolic mediation creates a safe reflective distance while enabling meaningful engagement. As part of the creative process, participants work in small groups to draw their character on a large sheet of paper, gradually enriching it with emotional traits, contradictions and visual symbols. This evolving drawing becomes a central reference throughout the workshop.

Autonomous work takes place between sessions and focuses on deepening the character's conflict and collaboratively developing a **short theatrical script**. Participants work in small groups of 4–6 to draft and rehearse their scene. This group work is a core part of the process, enabling the application of collective creativity, negotiation and symbolic expression.

Session two begins with a warm-up activity in which participants create a visual poem using natural objects, encouraging creative expression through non-traditional methods and fostering group cohesion by engaging with the natural environment. This activity invites participants to **step outside conventional verbal communication**, using objects like leaves or stones to spark imagination and prepare for the collaborative storytelling ahead. The session focuses on the presentation of dramatic scenes created during the autonomous work period, with each group presenting a production that reflects the conflicts and identity issues addressed in prior sessions.

This performance serves as an effective platform for the **discussion of personal challenges, mental health issues and the impact of the educational environment on the well-being of individuals**. A group discussion guided by the facilitator follows each performance, enabling participants to analyse the dynamics depicted, connect them to their own experiences and contemplate potential responses. The session concludes with a yarn ball exercise that emphasises the value of support systems and connections within the group.

Session three starts with a warm-up where participants photograph their personal **"safe spaces" on campus**, exploring places that are typically considered "outside" formal learning environments. These may be physical (a

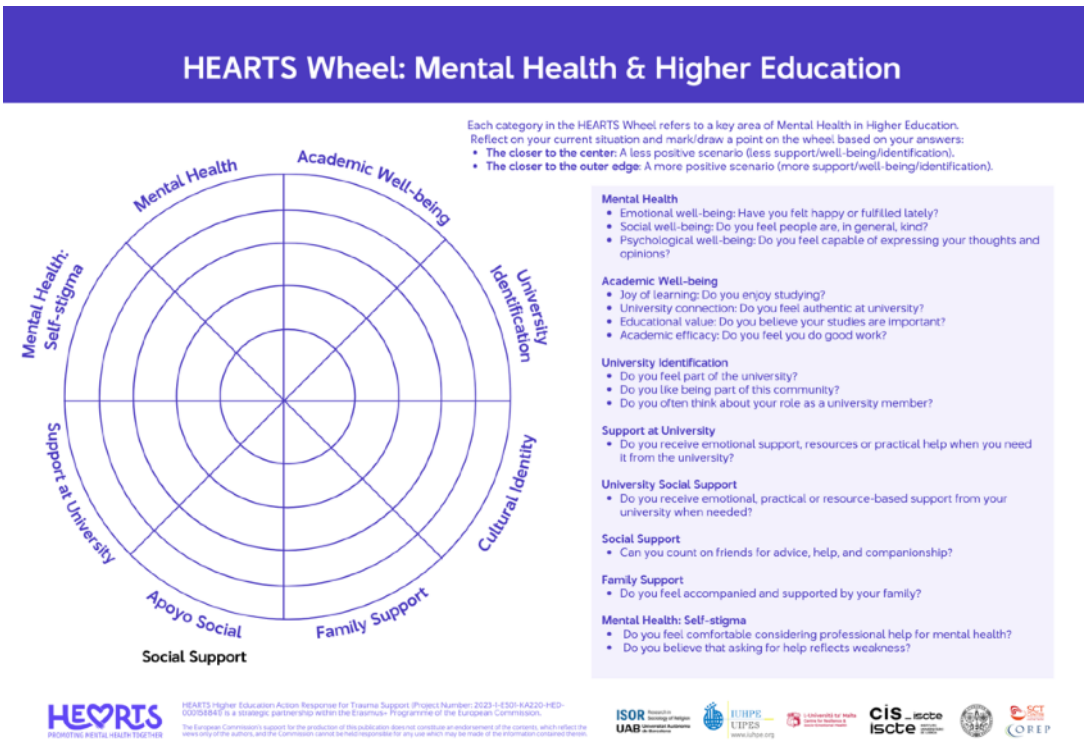
garden, the campus cafeteria or a car) or non-physical (e.g., sharing a coffee with a friend). This activity fosters group sharing and reflection on environments that promote emotional grounding, setting the stage for deeper exploration of the character's emotional world. The next activity is the collective creation of an **emotional mind map**.

Each group will work with their fictional character and reflect on the emotions linked to mental health that the character embodies (e.g., fear of rejection, hope, grief...).These emotions are mapped visually on a large sheet, using lines, colors or symbols to show connections between the character's internal emotional states.

The session concludes with an overview of the university's mental health promotion services and other related support resources. Multiple resources (psychological assistance, pedagogical assistance, inclusion services and anti-stigma programs) are presented and discussed. Students are introduced to these resources and encouraged to explore them if needed, knowing they are available and accessible.

Session four begins with a creative warm-up in which participants form small groups to create a mythological creature. This activity encourages teamwork, imagination and symbolic thinking. One of the core activities of this session is the **HEARTS Wheel.** The HEARTS Wheel, a visual tool designed to reflect on mental health in higher education, will be used for participants to assess their fictional character across eight interconnected dimensions: *Emotional Well-being, Social Well-being, Psychological Well-being, Academic Well-being, University Identification, Cultural Identification, University Social Support, Family and Friends Support and Mental Health Self-Stigma.* After completing the character's wheel, participants are invited to reflect privately on their own experiences using the same dimensions. The session ends with a closing ritual, *"Among Us, a Circle"* Activity, in which participants contribute a symbolic gesture, word or insight to the shared space of closure, marking the end of the collective process.

KEY ACTIVITY: **HEARTS WHEEL**

🎯 **Objectives**	➡ Evaluate critical dimensions such as mental health, academic well-being, cultural identity, social and family support, university identification and self-stigma. ➡ **Foster a reflective and supportive dialogue about inclusion and wellbeing** within the higher education context.
⏰ **When**	Middle of Session 4, once a shared context has been built through warm-ups and group work.
⏳ **Duration**	60 minutes
	Implementation
👁 **Preparation**	• Print the HEARTS Wheel (see Annex 1) on A3 paper for each group or individual. Participants can be divided into groups of 10 to 25 students. • Prepare a calm, comfortable space for dialogue and reflection. Ensure to be familiar with the mental health resources and services available at the university.
👣 **Step-by-step Description**	**Introduce the tool.** Present the HEARTS Wheel to participants using a projection and printed A3 versions. Explain that the tool serves as a visual framework to reflect on different dimensions of mental health and wellbeing in the university context. Clarify that it can be used either for analysing a fictional character or as a personal self-reflection exercise. ***HEARTS Wheel template available for download here*** 

	Explain how to use the wheel. Each axis represents a key dimension. Participants should mark a point on each axis that reflects the situation of their character (or themselves) based on the guiding questions provided. • **Closer to the centre** → a more negative or limited experience. • **Closer to the outer edge** → a more positive or supported experience. After marking all axes, connect the points to create a visual profile.
	Present and discuss each dimension. Walk participants through the eight dimensions one by one, reading aloud or displaying the guiding questions inserted in the Annex 1 . Encourage participants to pause and discuss briefly in their groups (or reflect individually) after each axis. These categories were identified in the following report: HEARTS Project Consortium. (2024). *HEARTS Foundation Bricks Report: Mental Health Needs Assessment of Five European Higher Education Institutions.*
	Visual mapping. After all axes are discussed and marked, participants connect the points on the wheel to generate a profile. This visual pattern can prompt immediate insights and group comparison.
💭 **Closing up**	**Facilitate group reflection.** Invite groups or individuals to share their reflections, focusing on questions such as: • What dimensions are strongest or most positive? • Where are the main tensions, absences or vulnerabilities? • How might support systems or institutional changes improve this profile?
	Link to real services. Project and/or distribute a visual map of mental health services available at the university. Facilitate a closing discussion about which services could support the character (or themselves), what support feels accessible and what is still missing.
🔄 **Variations and adaptations to different conditions of participants**	• Use a digital PDF version of the wheel on tablets or laptops. • Offer the HEARTS Wheel as a confidential and private self-reflection activity, especially when working with sensitive groups. • The tool can be adapted for use in contexts where character creation is not part of the workshop or where direct self-reflection is more appropriate.

💡**Comments and hints for facilitators**	The facilitator should emphasize emotional safety, confidentiality, and a non-judgmental approach throughout the activity. The facilitator should be attentive to participants' emotional reactions and offer optional breaks or individual support if necessary. The facilitator should present the HEARTS Wheel as a flexible tool for reflection, not as a diagnostic instrument. The facilitator should ensure participants know about and feel comfortable using the available support services.
Annex	***HEARTS Wheel template available for download here*** **GUIDING QUESTIONS** **Mental Health** • Emotional well-being: Have you felt happy or fulfilled lately? • Social well-being: Do you feel people are, in general, kind? • Psychological well-being: Do you feel capable of expressing your thoughts and opinions? **Academic Well-being** • Joy of learning: Do you enjoy studying? • University connection: Do you feel authentic at university? • Educational value: Do you believe your studies are important? • Academic efficacy: Do you feel you do good work? **University Identification** • Do you feel part of the university? • Do you like being part of this community? • Do you often think about your role as a university member? **Support at University** • Do you receive emotional support, resources or practical help when you need it from the university? **University Social Support** • Do you receive emotional, practical or resource-based support from your university when needed? **Social Support** • Can you count on friends for advice, help and companionship? **Family Support** • Do you feel accompanied and supported by your family? **Mental Health: Self-stigma** • Do you feel comfortable considering professional help for mental health? • Do you believe that asking for help reflects weakness?

Health Promotion through Sociology and Creative Approaches

Workshop 2 for Staff: Balancing Professional Life with Ikigai

Target group

From 10 to 20 staff members of the university.

Main objectives of the workshop

- ✓ Facilitate a personal reflection process to help university staff identify activities, roles and decisions that contribute to their sense of balance, satisfaction and mental well-being in professional life.
- ✓ Promote a **growth** mindset to strengthen participants' capacity to manage stress, navigate change and approach challenges with resilience.
- ✓ Encourage the development of sustainable **mental health habits**.
- ✓ Create a safe and collaborative environment where staff can share experiences, reflect on common challenges and engage in **supportive dialogue** about emotional care and workplace dynamics.
- ✓ **Raise awareness** of the university's **mental health resources** and support structures, fostering informed engagement with available services such as counselling, inclusion programmes and community-based support.

Workshop itinerary

The workshop is composed of **8 hours**, articulated in 2 in-person sessions of 4 hours each.

Session one introduces the HEARTS Project and outlines the goals and structure of the workshop. Participants are informed that the workshop is voluntary, that they may choose how and whether to participate and that the overall aim is to offer a safe and inclusive space to reflect on mental health in the university context. The session begins with a warm-up (*Yarn Ball*) to create group connection and psychological safety.

The first module introduces the concept of **growth mindset**, based on the work of Carol Dweck. Participants explore the difference between a fixed and a growth-oriented mindset. Emphasis is placed on recognising how each person responds to challenge, discomfort or conflict: not with the aim of denying obstacles, but to better understand patterns of resilience and adaptation. The concept is presented as a practical tool for navigating complex professional and personal situations.

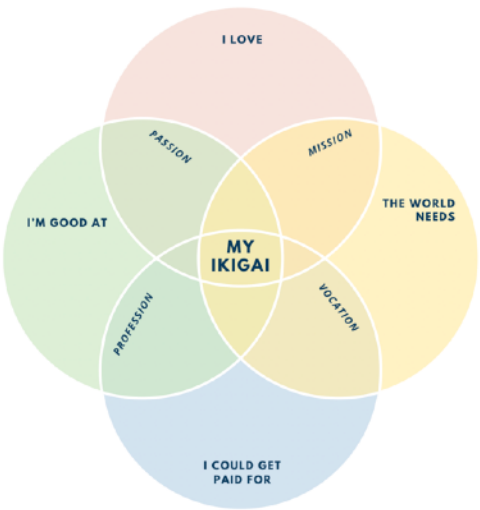
The second module is dedicated to the **Ikigai framework**, which is presented as an exercise in self-awareness and emotional clarity. While acknowledging its cultural origins and diverse interpretations, the workshop uses Ikigai to help participants identify activities and elements that contribute to their identity and make them feel better in everyday life. Through a step-by-step process, participants reflect on four dimensions—what they enjoy, what they are good at, what needs they connect to and what they are currently doing. The goal is not to define a purpose, but to map personal and professional elements that support balance and serenity.

Session two begins with a physical warm-up where participants reconfigure the space according to their preferences**.** This small gesture reinforces agency and supports the creation of a flexible and participant-led learning environment. The third module focuses on **SMART goal setting**, supporting participants in identifying specific, measurable, realistic and time-bound actions aligned with the reflections from their Ikigai exercise.

This is followed by a short segment on **decision-making for a balanced life**, where participants are invited to prioritise what truly matters and consider how their choices can be simplified or refined. The activity draws on minimalist thinking: not in terms of productivity, but as a way to reduce unnecessary pressure and clarify what contributes most to their emotional and mental stability.

The final module is dedicated to mental health habits, encouraging participants to identify simple, sustainable actions that promote emotional regulation and improve mental health in their daily life routines. Before closing, participants are presented with a **visual mapping of mental health support services** available at the university, including counselling, pedagogical services, inclusion offices and anti-stigma initiatives. The session concludes with a closing ritual (*Among Us, a Circle*), in which participants are invited to share a symbolic word, image or gesture that captures what they are taking from the whole workshop experience.

KEY ACTIVITY: **IKIGAI FOR MENTAL HEALTH**

🎯 **Objectives**	➡ Facilitate a process of **personal reflection** through an adapted framework of the **Ikigai** concept, helping university staff identify activities, roles and decisions that contribute to their balance, serenity and emotional well-being in professional life. ➡ Promote a deep understanding of internal values, personal **motivations** and **everyday actions** that **support mental health**. ➡ Promote the use of **visual thinking** as a tool for self-awareness, symbolic expression and accessible reflection, facilitating the graphic representation of ideas and the connection between concepts.
⏰ **When**	During Session one after an opening icebreaker or warm-up activity, once the group has established a trusting atmosphere.
⏳ **Duration**	90 minutes
	Implementation
👁 **Preparation**	• Provide the adapted Ikigai diagram in A3 format. Set up a quiet and comfortable space with creative materials (pencils, colored pens, post-its). • Explain to participants that the goal is not to identify a "vocation" or "life purpose," since meaning is not reduced to a single idea, but to explore elements that bring us serenity and well-being.
👣 **Step-by-step Description**	**Introducing Ikigai**. First, the facilitator briefly **explains the origin and cultural adaptation of Ikigai**. The term comes from Japanese culture and refers to what brings meaning, enjoyment or vital energy. It is found in small everyday actions and in connection with the community. In this exercise, the four-circle Ikigai model is culturally adapted and reinterpreted as a practical tool for self-exploration. Aware of the complexity and multiple layers of meaning within the Ikigai philosophy, we do not aim to define it as a single purpose or goal, but to **explore what everyday elements are aligned with our well-being** and a more serene life. 

The diagram also integrates a community dimension by including the circle "what the world needs." Thus, **our Ikigai is also built from our connection to the collective**, the community, the environment and a broader dimension that includes nature and shared global challenges.

Some participants may arrive with preconceived ideas about Ikigai. Encourage them not to reduce it to a career path, but to consider it something broader, beyond productivity. Invite them to see this version as a dynamic, plural, and evolving space, especially relevant for well-being.

Filling in the four outer circles. Each participant completes the following sections individually, guided by questions shown or read aloud by the facilitator:

- ***I love...*** What excites you? What do you enjoy doing? What puts you in flow? What could you talk about for hours?
- ***I'm good at...*** What do you excel at? What are you naturally good at? What do others usually value about you?
- ***I could get paid for...*** (now or potentially): Are you getting paid or have you been paid for it? Do others get paid to do what you do? What types of roles or services could be linked to this?
- ***The world needs...*** What social issues move you most? Where do you feel you can contribute? Are you contributing or would you like to? How do you co-create with others?

The facilitator encourages reflection with the following prompts: Are these four circles truly representative? Is something missing? Are there repeated or related ideas? Does this resonate with me today? Participants are invited to underline the elements they identify with most.

Constructing the intersections. The facilitator guides participants to connect the circles and explore intersections:

- *I love + I'm good at =* ***Passion****:* What activities do you deeply enjoy and perform with ease?
- *I'm good at + I could get paid for =* ***Profession****:* What activities could be or are your job?
- *I could get paid for + The world needs =* ***Vocation****:* What contributions could be recognized and valued?
- *The world needs + I love =* ***Mission****:* What excites you and also has a positive social impact?

The facilitator encourages reflection with the following prompts: Are these four circles truly representative? Is something missing? Are there repeated or related ideas? Does this resonate with me today? Participants are invited to underline the elements they identify with most.

Constructing the intersections. The facilitator guides participants to connect the circles and explore intersections:

- *I love + I'm good at =* ***Passion****:* What activities do you deeply enjoy and perform with ease?
- *I'm good at + I could get paid for =* ***Profession****:* What activities could be or are your job?
- *I could get paid for + The world needs =* ***Vocation****:* What contributions could be recognized and valued?
- *The world needs + I love =* ***Mission****:* What excites you and also has a positive social impact?

Participants are invited to detect words or ideas that appear across different circles. Once again, we invite reflection: What is repeated? What aligns with me? How do these connect with the community and surroundings?

Participants are invited to detect words or ideas that appear across different circles. Once again, we invite reflection: What is repeated? What aligns with me? How do these connect with the community and surroundings?

Formulating the Ikigai: Each person writes a phrase (or expresses it artistically) that summarizes their "Mental Health Ikigai" based on the intersections and reflections above. This may take several drafts until it feels authentic and aligned with their current experience.

💭 **Closing up**	Offer a few minutes of personal rest or landing. Some people may feel emotionally shaken. You can invite them to write freely, draw, breathe in silence, or move around. Participants are invited to reflect: • Do we currently engage in these activities? • How long has it been since we did them? • How do they make us feel? Do they bring serenity? Participants can share their Ikigai voluntarily. This encourages collective reflection and allows the group to discover shared themes and values. Are there common elements? Do support systems or networks exist that sustain these Ikigai? This is an **exploratory exercise to help make more aligned decisions** starting from small actions (doing more of what I like, reconnecting with meaningful values, etc.). The group is invited to reflect on **diversity**. Making this diversity visible and valid is essential for an inclusive culture of well-being. Acknowledge that the diversity of identities, paths and circumstances significantly shapes each person's ability to access spaces of calm and care. This is an act of active self-awareness that enables participants to identify and activate mental health supports within their own relational and contextual contexts.
	This means that mental health is not just an individual responsibility. It also depends on collective conditions: the institutional environment, the workload, the spaces for recognition and emotional security, among others. Ikigai is a tool, but what is essential is how we weave contexts that sustain it. The facilitator concludes by reminding participants that Ikigai is a **living and dynamic** concept. They are encouraged to revisit and revise it periodically. Over time, some aspects will likely remain, others may change and new ones may emerge, part of a continuous cycle of review and discovery.
🔄 **Variations and adaptations to different conditions of participants**	• Possibility of digital adaptation using tools like Miro, Jamboard or Canva to recreate the Ikigai diagram. • Include guiding examples in case participants feel stuck (non-prescriptive and open-ended).
💡 **Comments and hints for facilitators**	The facilitator should create a safe, inclusive, non-judgmental and non-interpretive environment. They should be aware that it is normal for questions or emotions to arise during the activity,and that it is not necessary to "resolve" tensions: some discomfort may arise when exploring complex identity-related topics, and the facilitator should offer support without rushing to conclusions. It is important to **avoid framing Ikigai in an individualistic or success-oriented way**, and embracing **community-based, relational and collective understandings of well-being**.
Annex	***HEARTS Ikigail template available for download here***

Health Promotion through Sociology and Creative Approaches

Workshop 3 for Students and Staff: Exploring Identity, Loss and Inclusion

Target group

From 10 to 20 participants (students and staff).

Main objectives of the workshop

- ✓ Foster self-awareness and **embodied reflection** to **explore stigma, identity, loss and belonging** within the university context.
- ✓ Promote inclusion and **intergroup dialogue** encouraging **mutual recognition** across roles and backgrounds.
- ✓ Create **safe** and **meaningful spaces** to **address grief**, **death** and **absence**, fostering connection between personal experience and collective understanding.
- ✓ Encourage critical **thinking around mental health** to promote reflection on inclusion and resilience.
- ✓ **Acknowledge** and celebrate the **diversity** of **life stories** and **emotional landscapes**, fostering connection, visibility and a sense of belonging.

Workshop itinerary

The workshop is composed of 8 **hours**, articulated in 2 in-person sessions of 4 hours each.

Session one begins with an introduction to the HEARTS Project and the structure of the workshop. The facilitators explain the objectives and values guiding the experience, including the voluntary nature of participation and the importance of creating a safe and respectful space.
The group then engages in the activity *"Welcoming Diversity"*, a symbolic warm-up exercise using the metaphor of a backpack to reflect on the life stories and emotional "backpack" that each person carries. Standing in a circle, participants are guided through a collective storytelling moment that invites recognition of diversity and belonging.

The session continues with an ***Image Theatre* exercise focused on academic stigma**. A series of projected statements and stereotypes common in university environments (such as "*Don't be so dramatic, it's just exam stress, it happens to everyone." or "If teaching staff are burned out, it's because they don't really like their job.")* are explored through collective and silent bodily representations. These visual responses are then discussed in group reflection, uncovering how these narratives may conceal suffering and perpetuate exclusion.

The second part of the session is dedicated to *Systemic Movements*, an activity inspired by family constellation methods. Participants move through space to select pieces of fabric that represent personal or inherited burdens. These elements are used to create symbolic sculptures that remain unspoken, allowing the group to reflect visually and intuitively on complex emotional dynamics. The session closes with a collective circle for emotional release and shared resonance.

Session two opens with a gamified warm-up activity called "*Samurai*" where participants form a circle and, through quick imaginary sword movements and sounds, create a dynamic rhythm of action and reaction that energises and connects the group.

The next activity introduces and invites participants to engage with a video game created around experiences of social isolation and recovery. Working in small groups, they interact with the game's narrative and then take part in a group discussion linking it to broader mental health issues. This is followed by a **Mental Health Card Game** designed to stimulate dialogue around emotional literacy, inclusion and cognitive diversity.

The next phase introduces the use of **Memory Objects**. Participants are invited to choose a symbolic object that represents how they would like to be remembered. This reflective activity serves as a transition into the Death Café.

The **Death Café** invites participants to engage in an open, non-judgmental conversation about death, accompanied by tea, coffee and pastries in an informal setting. This shared dialogue helps **normalise grief and absence**, breaking taboos often present in academic environments. It creates a space for connection, reflection and emotional honesty across roles and experiences. It is important to remember that at the Death Café, there is the presence of one or two experts on the subject, and participants are informed that the activity is not therapeutic in nature nor does it offer individual psychological support.

To close, the group moves outdoors for a ritual activity titled *"**Around the Tree"***.

Participants engage in a symbolic gesture that links their personal reflections on death with a **broader sense of community and continuity**. The ritual draws on the principle *"no roots, no wings"*, developed by Bertold Ulsamer and inspired by Bert Hellinger's systemic therapy, encouraging participants to reflect on **how connection to memory and belonging fosters growth and resilience**.

KEY ACTIVITY: **DEATH CAFÉ**

🎯 **Objectives**	➡ Facilitate a safe, open and non-judgmental space to discuss death, grief and loss. ➡ Encourage emotional expression and mutual listening across roles and generations. ➡ Break taboos surrounding death in higher education contexts and promote care-based dialogue.
⏰ **When**	In the middle of the workshop, after a warm-up activity that helps set an open and reflective atmosphere. It is recommended to develop the activity in Session two or at the end of the workshop.
⏳ **Duration**	From 90 to 120 minutes
	Implementation
👁 **Preparation**	• The facilitator of this activity may or may not be the person guiding the overall workshop. The Death Café facilitator should have experience or lived insight into a specific aspect of death, grief or loss (e.g., migration, perinatal loss, animal companionship, spiritual care). This person is not necessarily a therapist, but someone capable of holding space and nurturing open, sensitive conversations. • If the regular workshop facilitator is not fully familiar with these themes, they may invite an external guest to co-facilitate. In this case, the main facilitator can support the session by holding the space, monitoring group dynamics and ensuring emotional safety for all participants. • Set up small groups (4–6 people) around tables in an informal café-like arrangement and provide tea, coffee, water and snacks (pastries, fruits…). • Create a calm and private atmosphere: natural light, comfortable seating and minimal distractions to support open and respectful conversation.
👣 **Step-by-step Description**	The facilitator introduces the activity, explaining that this is not a therapy session, but a space for **open and respectful conversation around death, grief and the emotional experience of absence**. Participants join their group and are free to speak, listen or remain silent. Conversation prompts may be offered if needed (such as: *"How do you relate to the idea of loss?", "What role does death play in our lives or institutions?"*). The facilitator monitors the room, ensuring each group feels safe and supported, while avoiding any pressure to speak or emotionally interpret what is shared.
💭 **Closing up**	The facilitator gently informs the group that the session is coming to an end and offers a moment for anyone who may wish to add a final thought or comment—entirely voluntarily. They thank everyone for being part of the Death Cafe Session and remind participants that the University offers mental health and grief-related support services, which they can access at their own pace. The facilitator mentions that they will remain available in the space after the session, in case someone would like to have a private conversation.

🔄 **Variations and adaptations to different conditions of participants**	• Ensure physical accessibility and comfortable, low-stimulation environments. • Allow written, silent or symbolic participation for those who prefer non-verbal expression. • Offer a parallel smaller group for participants experiencing recent or intense bereavement, facilitated with enhanced emotional sensitivity.
💡 **Comments and hints for facilitators**	The facilitator should clarify that the Death Café is a non-therapeutic, non-judgmental space for sharing or silent presence. They allow conversations to flow naturally, without forcing disclosure or directing discussions, and monitor for emotional distress while being ready to offer silent support, breaks or discreet referrals to professional resources. It is important to stay mindful of cultural and individual differences in grief expression, avoid assumptions and encourage narrative, artistic or symbolic expression for those who may find verbal dialogue difficult.

HEARTS

LEARNING PATH

HEALTH PROMOTION THROUGH THEATRE (HPT)

SCT CENTRE
SOCIAL COMMUNITY THEATRE CENTRE

OREP

Health Promotion Through Theatre (HPT)

Learning Path by Social Community Theatre Centre | COREP

General approach of the learning path

The learning path "Health Promotion through Theatre" follows the **Social and Community Theatre methodology** and integrates it with approaches from Health Promotion and Health Education.

The Theatre Approach used in HPT focuses on Socio-Emotional-Learning and Cooperative Learning and it is developed through **theatre techniques and participatory active methods**, aiming at group building, self- awareness of personal well-being, collective awareness of individual and social determinants of health that may create vulnerable mental health conditions for students and staff. Moreover, the HPT Learning Path provides fundamental knowledge of the core concepts of Health Promotion and Mental Health and presents the academic services and resources available for students and staff.

Theoretical and methodological framework

The Social and Community Theatre approach is embedded in the Performance Studies with specific reference to the **value of theatre in enhancing skills and wellbeing** (WHO, 2019) and supporting inclusive behaviours. It was designed in the early 2000s by University of Turin with Social Community Theatre Centre in partnership with social and health academic and public institutions through multidisciplinary research projects in healthcare settings and in regard to various health challenges, such as supporting oncological hospitals (patients, caregivers, health professionals), training health professionals in communication skills, supporting psychosocial and mental health in conflict areas, promoting teen's mental health. It is a form of Applied Theatre and Participatory Art: **participants are involved as an active part of the theatre process**. It has a fundamental capacity building perspective; it is grounded on Social Emotional Learning and Cooperative Learning.

The basic theatre techniques come from group professional theatre and theatrical animation. They include 1) theatre training- aiming at self body awareness, at building trust, empathy, mutual understanding and cooperation among the group; 2) autobiographical storytelling; 3) narrative and dramatic writing (creating stories, characters); 4) creative group role playing; 5) theatrical improvisation, 6) staging performances. It also includes games aiming at creating a

playful, non-competitive and non-judgmental environment and active methods aiming at sharing experiences or training specific skills, such as active listening.

The Social Community Theatre approach is developed throughout **workshops and community events**. Workshops are structured into sessions and explore a given topic or a topic chosen by participants. The first sessions aim at group building by enhancing interpersonal knowledge and group trust; they also focus on learning and strengthening basic theatre skills, such as controlling the body and non- verbal communication, using the voice, facing being watched by others, using creativity. In the middle sessions participants explore the topic by sharing their personal point of view through narratives, staging specific situations and role playing. The last sessions are focused on strengthening the theatrical communication skills of the group and building up a full performance out of the previous creative exploration of the topic; the performance may have many forms (stage theatre, itinerant theatre, theatre exhibition, etc.) and aims at presenting the group's creative findings to a larger public.

The HPT Learning Path is developed through theatre workshops, which integrate the SCT's theatre techniques with **Health Promotion approach**. Through creative exercises, expressive training and role playing participants share and discuss their different experiences on the topic of wellbeing and mental health and their personal strategies in order to face health challenges in their life and in the academic environment. They are presented with the WHO definitions of health and mental health and with the basic theoretical approach of Health Promotion. They strengthen their ability to act, both as individuals and as part of a large community setting, according to a Health Promotion perspective, with specific regard to skills such as self body-mind awareness, interpersonal and communication skills, which are recognised as social determinants of wellbeing and health.

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Facilitator's professional profile and requirements

- ***Professional background***: theatre artist, social workers, community psychologists, wellbeing experts.
- ***Skills:***
  - Active and empathic listening
  - Ability to manage emotionally sensitive topics
  - Theatre skills
  - Creative skills
  - Relational and communication skills
  - Group leadership
- ***Experience:***
  - Experience in leading theatre workshops (preferable with young adults and adults) or experience in facilitating groups with active, not formal and creative methods
  - Knowledge of academic environment
  - Knowledge of health promotion
  - Knowledge of local primary mental health services

Health Promotion through Theatre

Workshop 1 for Students: Health Challenges, Help Seeking and Health Resources

Target group

From 10 to 20 university students, with two facilitators needed

Main objectives of the workshop

- ✓ Share a **common definition of wellbeing and health** among participants.
- ✓ Compare **subjective experience of wellbeing** to WHO Mental Health and Health Promotion core concepts.
- ✓ **Develop individual life skills**, with special regard to relational skills, students' growth mindset and well-being self awareness and self-care.
- ✓ Facilitate shared knowledge about students' health needs and **peer health promotion behaviours** in academic and personal contexts, with attention to isolation risks and exclusion in social contexts.
- ✓ **Recognise health resources** within one's relational network and health resources available in academic environments and in the local public health services.

Workshop itinerary

The workshop is composed of **16 hours**, articulated in sessions as follows:

- 4 sessions of 2,5 hours
- 1 intensive session of 6 hours

Session one: includes a presentation to the group of the workshop (objectives, sessions' topics, facilitators' self presentation) and the agreement on rules of participation to the workshop (taking part in activities is not mandatory, no productive aim, free from judgment environment, playing as a means of learning, etc.).

First part of session one: introducing oneself (name, age, which academic program they are enrolled in) and sharing a common definition of wellbeing and health among participants through a creative exercise (see key activity description in students and staff MHPT learning path).

Second part of session one: is meant to build the group, the trust and knowledge between participants using active group exercises and theatre exercises. During the first session awareness on each one's wellbeing is gradually raised and it is something that is gradually further developed across all the sessions (see key activity description in staff MHPT learning path).

Session two: is aimed at sharing ideas of the concept of wellbeing and health that each participant has and implementing those concepts through further information from WHO main guidelines.

First part of session two: the session is developed through theatre technique (Theatre Image) based on "Theatre of the Oppressed" by Boal. Image Theatre is the use of still images (freeze-frames) to explore abstract concepts such as relationships and emotions, as well as realistic situations. The Image Theatre exercise facilitates the sharing and co-construction, both individually and as a group, of meanings and experiences related to concepts and practices of wellbeing.

Second part of session two: the facilitators connect the ideas about health presented by participants in phase one with WHO core concepts about health and mental health and health promotion, which are presented by slides. The map of the health resources available in the academic environment and in the local public health services is presented to participants. All these materials, shared on a cloud, are available for participants to consult during and after the workshop.

Session three: it introduces the theme of health as a "social health" and proposes theatre exercises that start from individual self- awareness and develop into creative collaboration experiences, from pairs to the whole group (e.g. stick balance exercise). At the end of the session the facilitators reflect with the participants on the activity as an example of social wellbeing experience.

Session four: the theme of "social health" is further explored through a creative exercise of storytelling and role playing activities (see key activity description below in MHPT student learning path) facilitating shared knowledge about students' health needs and peer health promotion behaviors in academic and personal contexts, with attention to isolation risks and exclusion in social contexts.

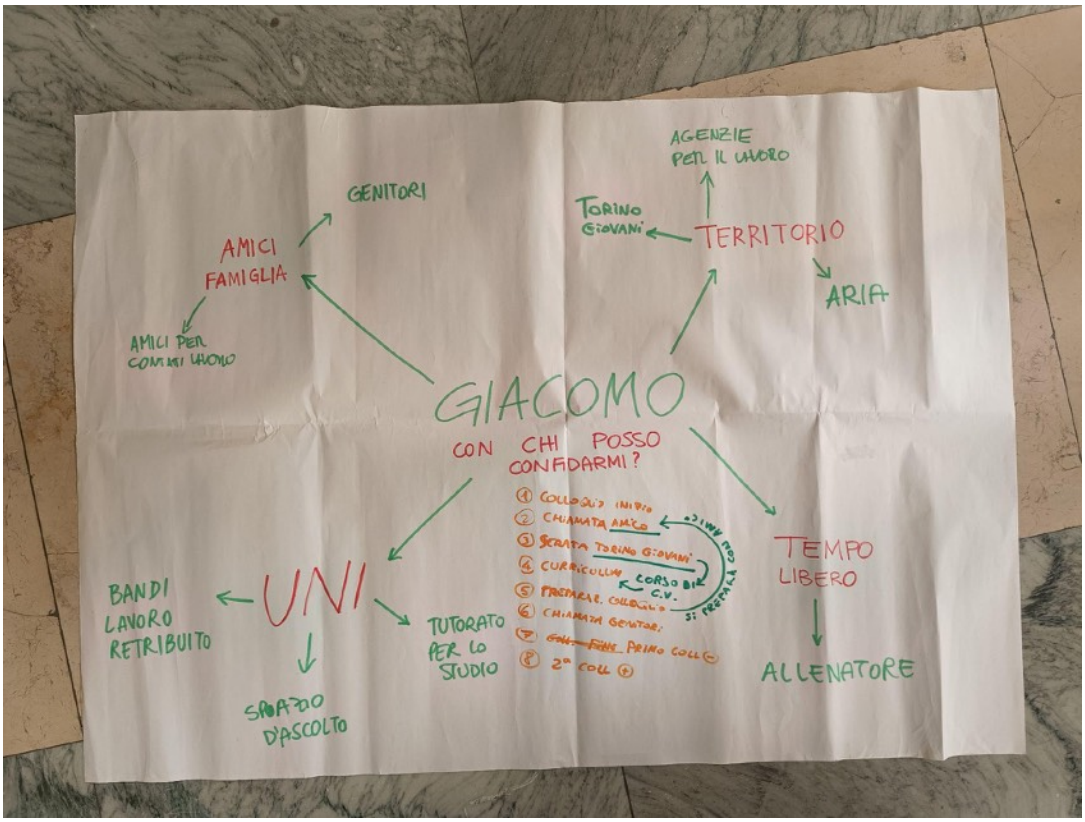
Session five (6 hours session): it aims to reflect on the "needs of the university community", which begin to emerge during session four, through theatre exercises and role-playing. The session also focuses on addressing these needs by exploring available support services offered by the university, while encouraging the collective sharing of problem solving strategies that individuals can adopt to support their wellbeing.

First part of session five: in small groups participants create a help seeking map (see key activity description below in MHPT student learning path). They also explore the University's student services online and integrate this with personal knowledge and community- based resources.

Second part of session five: through creative exercises participants share the wellbeing strategies, resources and the meaningful moments they experienced during the workshop, sharing a common patrimony of knowledge and skills of the group.

Closing up: participants share "Two key takeaways from the experience" and "One piece of advice they would like to offer others from this experience".

KEY ACTIVITY: **CHARACTERS AND HEALTH CHALLENGES AT THE UNIVERSITY**

🎯 **Objectives**	➡ Sharing students' health needs within the academic context. ➡ Activating group problem solving in order to promote one's mental health. ➡ Exploring health resources within the academic and local context available for students.
⏰ **When**	It begins in session four and it is concluded in session five.
⏳ **Duration**	70 minutes in session four and 70 minutes in session five
	Implementation
👁 **Preparation**	A large, empty room is needed, where space can be created for both the stage and the audience. Large sheets of paper, markers, adhesive tape. Chairs and tables can be useful for creating the settings of the theatrical scenes performed by the participants.
👣 **Session four Description**	Divided into subgroups, each group creates a character: a university student of their age. The character has a name and specific traits, selected from a list provided by the facilitators (such as gender identity, sexual orientation, etc.), forming an "ID card" for the character. 

These characteristics represent personal and social conditions that can have a significant impact on a student's health; from a salutogenic perspective, they are considered **individual and social determinants of health** and include:

- General identity
  - Gender identity
  - Geographical origin (place of birth)
  - Personal identity and specific aspects
  - Sexual orientation
  - Religious beliefs
  - Abilities, neurodivergence, disabilities (physical, mental, etc.)
- Sense of belonging:
  - Recently arrived in Turin
  - Religious beliefs
  - Affiliation with student/staff group active in something (committees, sports, etc)
- Performance:
  - For students: falling behind in coursework, irregular or discontinuous academic progress, high or low academic performance, change of study program or major etc.
  - Health conditions (chronic illness, diagnosed medical condition, addiction, psychiatric condition, receiving care from health services)
  - Socio- economic condition (receiving a scholarship, etc.)
  - Family situation (living with family of origin, alone, with flatmates, in a residential college or in a community)
  - Housing situation (residing in Turin or outside the city)

Based on the characteristics selected for their character, **each subgroup identifies a potential "health challenge"** the character might encounter in their experiences as university students. They then create a theatrical scene that represents a realistic moment in which the character is confronted with this specific "health challenge". Examples of health challenges explored in participants' scenes include: performance anxiety escalating into panic attacks during exams; intense loneliness experienced by a student living away from home or by an international student lacking a social or emotional support network in an unfamiliar environment; neurodivergent student in a non- inclusive academic setting; losing scholarship and having to manage academic, housing and living expenses independently, etc.).

Each subgroup presents their scene to the rest of the participants with the character's "ID card" displayed on the wall as a backdrop. After each performance the presenting subgroup remains on stage, while the facilitators invite the audience to **reflect on the scene and to identify the "health challenge" the character is facing**. This opens a guided discussion to explore key aspects of the scene.

	For example, in one scene, a student experiences performance anxiety escalating into a panic attack: the discussion revealed that the student lacked a supportive network (with judgmental parents and friends who suggest unhelpful strategies, such as using cannabis to relax). In another scene, with a neurodivergent student, the group highlighted how the student's need for stability was strongly challenged by the organizational and logistical structure of the Italian University system, which often includes frequent classroom changes and overcrowded environments; in this scene participants also identify possible support and mediation resources, such as peer tutors or the University's Inclusion Office Services. All these elements, both regarding the character's situation and the available resources, serve as the starting point for the next phase of the subgroup's activity. Building on the scene developed in the previous phase, each subgroup is now asked to create and present **two "frozen scenes"** like snapshots or frames: • The first should capture the most meaningful moment for their scene: one that best r**epresents the "health challenge" faced** by their character. • The second is newly created and should represent **how the character overcomes the "health challenge"**, how "we would like the story to be solved". All subgroups present their frozen scenes to the rest of the group.
Session five Description	Facilitators show an example and explain what a **help seeking map** is: a visual representation of the personal resources (family, friends, formal or informal groups the person belongs to) and contextual resources (university services, public and private support services, local community groups, sports clubs, etc.) that an individual can access when facing mental health challenges. Working in the same subgroups from session four, each subgroup creates their help-seeking map for their character. In doing so, they can use a provided document listing health resources available in the academic environment (available on a shared drive) and in the local public health services.

Starting from the two frozen scenes created at the end of session four and guided by their character's help seeking map, each subgroup now develops an additional 3- 4 frozen scenes. These scenes represent the steps their character must take to **move from a critical health challenge to a resolution**: "which actions does your character need to take to overcome their health challenge?", "which are the supportive person or resources getting involved?".

Each subgroup presents their new sequence of frozen scenes to the full group. After each presentation, the facilitators guide a discussion to reflect on the actions taken and the resources the character activated. The subgroup then shares the help seeking map they created.

🔄 Variations and adaptations to different conditions of participants

Facilitators are required not to refer to the personal life story of the participants, but to focus on designing a fictional character with the groups, one that may actually include specific conditions of one or more participants, though this choice should be left to participants.

💡 Comments and hints for facilitators

In the fictional character designing exercise, the facilitator should help the group be realistic in order not to create fictional characters who are far away from the students' actual experience. On the contrary, the facilitator should help the group in **designing a fictional character close to the participants' health challenges** in order to empathize with them and put themselves in their shoes.

When this activity is proposed in the "staff" and "students and staff" workshops, the facilitator asks the subgroups to create a character that also belongs to the staff world. For example, if there are four subgroups, two subgroups will work on creating "two students characters", while the other two subgroups will focus on "two staff characters". In the "staff" or "students and staff" workshop this activity is limited to the proposal described in session four.

Health Promotion through Theatre

Workshop 2 for Staff: Self awareness, Health needs and Daily Salutogenic Strategies

Target group

From 10 to 20 university staff members (teaching staff, administrative staff, research staff, etc.), with two facilitators needed

Main objectives of the workshop

- ✓ Share **staff health needs** within the academic work context
- ✓ Activate **group problem solving** in order to promote one's mental health at work
- ✓ **Explore health resources** within the academic work context

Workshop itinerary

The workshop is composed of 8 hours, articulated in 3 sessions as follows:

- 2 sessions of 2.5 hours
- 1 session of 3 hours.

Session one: includes a presentation to the group of the workshop (objectives, sessions' topics, facilitators' self presentation) and the agreement on rules of participation to the workshop (taking part in activities is not mandatory, no productive aim, free from judgment, environment, playing as a means of learning, etc.).

First part of session one: introducing oneself (name, job within the academic context, etc.) and sharing a common definition of wellbeing and health among participants through a creative exercise with objects (see key activity description in students and staff learning path).

Second part of session one: is meant to build the group, the trust and the knowledge between participants, using active group exercises and theatre exercises. During the first session awareness on each one's wellbeing is gradually raised and it is something that is gradually further developed across all the sessions (see key activity description in staff learning path).

Third part of session one: is aimed at sharing ideas of the concept of wellbeing and health that each participant has and implementing those concepts through further information from WHO main guidelines. Phase three is developed through theatre technique (Theatre Image) based on "Theatre of the Oppressed" by Boal. Image Theatre is the use of still images (freeze-frames) to explore abstract concepts such as relationships and emotions, as well as realistic situations. The Image Theatre exercise facilitates the sharing and co-construction, both individually and as a group, of meanings and experiences related to concepts and practices of wellbeing. The facilitators connect the ideas about health presented by participants in the Theatre Image with WHO core concepts about health and mental health and health promotion, which are presented by slides. The map of the health resources available in the academic environment and in the local public health services is presented to participants. All these materials, shared on a cloud folder, are available for participants to consult during and after the workshop.

Session two: it introduces the theme of health as a "social health".

First part of session two: the facilitators propose theatre exercises that start from individual self awareness (such as listening to one's own breath) and gradually develop into shared experiences of "myself and others". Through a series of paired exercises participants first focus on perceiving their own breath and their partner's breath. After switching partners, they work together to find a shared rhythm, exploring the possibility of breathing in sync.

Second part of session two: the theme of "social health" is further explored through a creative exercise of storytelling and role playing activities (see key activity description in students learning path) facilitating shared knowledge about staff and students' health needs and peer health promotion behaviors in academic work context with attention to isolation risks and exclusion in social contexts.
At the end of the session, facilitators guide a shared group reflection, focusing on which elements of well-being participants were able to identify through the experience.

Session three: aims to develop and share problem solving strategies (advice) related to "health needs within the university community".

First part of session three: proposes theatre exercises that begin with individual self awareness and gradually involve experiences of mutual listening and collaboration in pairs (blind guide exercise: one participant, with eyes closed, is gently guided through a sensory exploration of the space by their partner). Communica-

tion is not verbal and relies only on the contact between the palms of their hands. At the end of the experience, facilitators ask the participants who were with eyes closed to associate the feeling of being guided with a past personal experience of wellbeing. Roles are then switched within each pair).

Second part of session three: creative exploration of the communicative and narrative potential of theatrical use of objects and chairs (participants are invited to experiment with different, even unconventional, uses and postures). This session is preparatory to the following part.

Third part of session three: each subgroup has to create a theatrical scene titled: "A catalogue of practices and strategies for promoting wellbeing for a colleague or a student in the University context (the scene should keep track of the character work developed in session two, as well as the experiential work from the first part of this session).

Fourth part of session three: sharing a definition of wellbeing and health among participants through the same creative exercise with objects done in the beginning of the workshop in session one (see key activity description in students and staff learning path).

Closing activity: sharing feedback on the experience of the workshop and evaluating it.

KEY ACTIVITY: **WHAT DO I DO IN MY LIFE TO FEEL GOOD? SALUTOGENIC BEHAVIOURS**

🎯 **Objectives**	➡ Facilitating **shared knowledge about health promotion behaviours** in the academic and personal contexts. ➡ Promoting a **salutogenic perspective to life**. ➡ Developing individual life skills, with special regards to **growth mindset** and **self awareness** of one's well-being and self-care. ➡ Becoming **aware of the salutogenic effect** of the activities done in the whole session.
⏰ **When**	The activity is to be done at the beginning and ending of a session that has other main activities. It is also a kind of a ritual of self listening and sharing the salutogenic value of the experience done in the session.
⌛ **Duration**	Approximately 40-50 minutes: 20 minutes for Part one (listening to one's wellbeing level), 20-30 minutes for Part two (acknowledging and sharing with the group "one's salutogenic activity done in the past week" at the beginning of the session), and "two salutogenic activities did during today's session" at the end of the session)
	Implementation
👁 **Preparation**	Prepare the room/ space so that it is as spacious as it can be, without obstacles.
👣 **Description - At the beginning of the session**	**Part one:** Standing in a circle, the facilitator asks the participants to listen to signals of the body with their eyes closed, and then to indicate, by raising or lowering their arm, the gradient (level) of energy and wellbeing they feel they have at that moment, based on their self listening. Facilitator may refer to both -energy or wellbeing- explaining that they are meant as an interconnected dimension of life. The **wellbeing level** can freely range from a "ground" level 1 (arm and hand pointing toward the floor) to a "maximum" level 10 (arm and hand raised upwards).

	The facilitator may ask each participant to explain the kind of activity they feel able to do with that level of energy (wellbeing). The facilitator may invite participants to reflect on what it means to do a certain activity with a low level of energy (wellbeing); it may open up a group discussion on the relation between **self awareness of personal wellbeing** and challenge required by professional/ personal tasks. The activity can be done at the first beginning of the whole workshop even if people haven't presented themselves to each other with their names. **Part two**: the facilitator asks each participant to share one's salutogenic activity done in the past week: • In their personal life (everyone takes turns sharing). • In the University's life (everyone takes turns sharing). This second question is a variation that can be added (not replaced) to the first one, by proposing an additional round of sharing.
👣 **Description - At the end of the session**	**Part one**: standing in a circle, the facilitator asks the participants to listen to signals of the body with their eyes closed, and then to indicate, by raising or lowering their arm, the gradient (level) of the feel they have at that moment, based on their self listening. The wellbeing level can freely range from a "ground" level 1 (arm and hand pointing toward the floor) to a "maximum" level 10 (arm and hand raised upwards). Example of facilitator prompt: "How did today's session make you feel? How are you feeling right now? On a scale from 1 to 10, how would you rate your current level of wellbeing? Has it changed since the beginning of the session? Sometimes the number in itself doesn't change, but the facilitator asks whether the feeling has changed (we might feel lighter or more at ease). **Part two**: The facilitator then invites each participant to share: "Two things from today's session that made you feel good".
🔄 **Variations and adaptations to different conditions of participants**	Activity Level of energy/wellbeing can be adapted to people with reduced movement possibilities (wheelchairs, etc.) by proposing to the whole group to sit and do the level of well-being activity sitting rather than standing on their feet. The facilitator supports vulnerable people in sharing salutogenic personal experience, by rephrasing the question in a way that helps participants to search for positives in their experiences, even if they seem to them very few or little. The concept of salutogenesis may be discussed and redefined with participants with diverse cultural backgrounds.
💡 **Comments and hints for facilitators**	It may be helpful for the group if the facilitator explains the reason behind the request to share the salutogenic activities done. Verbalizing one's salutogenic activity helps to identify it more clearly and recognize its value; moreover, sharing these activities can inspire others and become part of the **group's collective resources**, fostering the exchange of **new salutogenic practices**.

Health Promotion through Theatre

Workshop 3 for Students and Staff: Health Personal Experience and Health core concepts, Needs and Strategies

Target group

From 12 to 20 participants), half staff members (teaching staff, administrative staff, research staff, etc.) and half students. Two facilitators are needed.

Main objectives of the workshop

- ✓ Sharing participants' health needs within the academic environment, with specific regards to differences between students and staff due to role and age.
- ✓ Activating group cross age and role problem solving in order to promote one's mental health, with special regard to situations in which both staff and students are involved.
- ✓ Exploring health resources within the academic environment.
- ✓ Designing specific suggestions and tips aimed at promoting healthier relationships in the academic environment.

Workshop itinerary

The workshop is composed of 8 hours, articulated in 3 sessions as follows:

- 2 sessions of 2.5 hours
- 1 session of 3 hours.

Session one: includes a presentation to the group of the workshop (objectives, sessions' topics, facilitators' self presentation) and the agreement on rules of participation to the workshop (taking part in activities is not mandatory, no productive aim, free from judgment, environment, playing as a means of learning, etc.).

First part of session one: is about introducing oneself (name, job within the academic context, etc.) and sharing a common definition of wellbeing and health among participants through a creative exercise with objects (see below the key activity description in students and staff learning path).

Second part of session one: is meant to build the group, the trust and the knowledge between participants, using active group exercises and theatre exercises. During the first session awareness on each one's wellbeing is gradually raised and it is something that is gradually further developed across all the sessions (see below the key activity description in this staff

learning path).

Third part of session one: is aimed at sharing ideas of the concept of wellbeing and health that each participant has and implementing those concepts through further information from WHO main guidelines. Phase three is developed through theatre technique (Theatre Image) based on "Theatre of the Oppressed" by Boal. The Image Theatre exercise facilitates the sharing and co-construction, both individually and as a group, of meanings and experiences related to concepts and practices of wellbeing. The facilitators connect the ideas about health presented by participants in the Theatre Image with WHO core concepts about health and mental health and health promotion, which are presented by slides. The map of the health resources available in the academic environment and in the local public health services is presented to participants. All these materials, shared on a cloud folder, are available for participants to consult during and after the workshop.

Session two: it introduces the theme of health as a "social health".

First part of session two: the facilitators propose theatre exercises that start from individual self- awareness (such as listening to one's own breath) and gradually develop into shared experiences of "myself and others". Through a series of paired exercises participants first focus on perceiving their own breath and their partner's breath. After switching partners, they work together to find a shared rhythm, exploring the possibility of breathing in sync.

Second part of session two: the theme of "social health" is further explored through a creative exercise of storytelling and role playing activities (see key activity description in students learning path) facilitating shared knowledge about staff and students' health needs and peer health promotion behaviors in academic work context with attention to isolation risks and exclusion in social contexts. At the end of the session, facilitators guide a shared group reflection, focusing on which elements of wellbeing participants were able to identify through the experience.

Session three (last session): aims is to develop and share problem solving strategies (advice) related to "health needs within the university community"

First part of session three: proposes theatre exercises that begin with individual self- awareness and gradually involve experiences of mutual listening and collaboration in pairs (blind guide exercise: one participant, with eyes closed, is gently guided through a sensory exploration of the space by their partner). Communication is not verbal and relies only on the contact between the palms of their hands. At the end of the experience, facilitators ask the participants who were with eyes closed to associate the feeling of being guided with a past personal experience of wellbeing. Roles are then switched within each pair).

Second part of session three: creative exploration of the communicative and narrative potential of theatrical use of objects and chairs (participants are invited to experiment with different, even unconventional, uses and postures).

Third part of session three: each subgroup has to create a theatrical scene titled: "A catalogue of practices and strategies for Promoting wellbeing for a colleague or a student in the University context" (the scene should keep track of the character work developed in session two, as well as the experiential work from the first part of this session).

Fourth part of session three: sharing a definition of wellbeing and health among participants through the same creative exercise with objects done in the beginning of the workshop in session one (see key activity description in students and staff learning path).

Closing activity: sharing feedback on the experience of the workshop and evaluating it.

KEY ACTIVITY: **TALKING ABOUT HEALTH THROUGH OBJECTS**

🎯 **Objectives**	➡ Sharing the **meaning of the terms "health promotion", "wellbeing"**, based on personal reflection. ➡ Comparing personal reflections with the definition of "health", "wellbeing" and "health promotion" outlined in the World Health Organization (WHO) international guidelines.
⏰ **When**	During the first session - after the presentation of the workshop and the agreement on rules - and in the end of the last session
⌛ **Duration**	30 minutes (for each session)
	Implementation
👁 **Preparation**	Before the workshop begins, set up a circle of chairs (one for each participant) and place a series of objects covered by a colorful cloth within the circle (so participants cannot see them until the facilitator removes the cloth to reveal the objects). The objects have been selected based on their potential to convey meanings related to different aspects of the concept of health: • a package of anti-inflammatory medication • a sheet with the word "hospital" crossed out with a red "X" • an apple • a hiking boot (or a mountain boot) • a health insurance card • a colorful origami made of paper, showing stylized human figures holding hands • a theatrical mask • a museum subscription card • a real potted plant • a book (focused on the salutogenic influence of nature in humans' daily routines)

👣 ***Description - During the first session***	The facilitator asks all participants, seated in the chairs (freely chosen order) to introduce themselves (name, job within the academic context, course of study for students, etc.) and to **choose a single object that represents for them "the idea of health"**, reflecting on the most important elements that define wellbeing and being healthy. Each participant introduces themselves and explains the object they have chosen. Based on the participants' explanations, the facilitator connects their explanations to **elements of the scientific literature on health promotion**. For example, if a participant chooses a small plant and explains that health is not static but rather like a plant that changes with the seasons, the facilitator might relate this to the concept of health as a "dynamic balance of physical, emotional, social, spiritual, and intellectual well-being" (O'Donnell, 2008).
👣 ***Description - At the end of the last session***	The facilitator repeats this activity at the end of the workshop to explore with the participants "if" and "how" the workshop experience may have changed their understanding of health compared to the first session.
🔄 **Variations and adaptations to different conditions of participants**	With participants with physical impediments the activity can be done with no request to move actively: the facilitator can be the one fetching the object and giving to participants for their comments. The meaning of the objects is based on the multiple uses they may have in western culture; with people with different cultural background the facilitator should inquire before launching the activity which is the meaning to them and share with the group and enlarge the significance of the objects so to have a larger and shared meaning participants can play with.
💡 **Comments and hints for facilitators**	Participants are asked to choose just one object, but if someone feels they need two to better explain their idea of health, the facilitator can decide how much flexibility to allow in the activity guidelines.

HEARTS

LEARNING PATH

HEALTH PROMOTION THROUGH SOCIAL INCLUSION (HPSI)

cis_iscte

iscte INSTITUTO UNIVERSITÁRIO DE LISBOA

Health Promotion Through Social Inclusion (HPSI)

Learning Path by CIS- Iscte | Instituto Universitario de Lisboa

General approach of the learning path

The World Health Organization (WHO; 2025) has recently identified social isolation and loneliness as pressing public health concerns affecting all age groups and demographics. However, certain groups, particularly young and older adults and those who experience exclusion and discrimination, face heightened vulnerability. According to the WHO, the consequences of loneliness, isolation, and exclusion are profound, negatively impacting individual mental health and community well-being. Addressing these challenges requires deliberate efforts to **foster social connections** through targeted initiatives.

Higher education institutions are uniquely positioned to tackle these issues. While campuses bring together diverse populations, they also grapple with fostering inclusive spaces for meaningful connections among their members (Riva et al., 2024). Universities serve as critical environments where people learn, work, and socialize, often during crucial life transitions (e.g., entering adulthood; developing intimacy, sexuality, and partnerships; initiating a career; Cleary, 2011). For many students and staff, this setting can amplify distress, particularly when individuals are separated from their established support networks (i.e. family of origin and friends) and must navigate new social dynamics in a high-pressure and competitive environment (Cleary, 2011; Urbina-Garcia, 2020). At the same time, higher education institutions possess the knowledge, resources, and influence to implement effective innovative solutions to these challenges (Hunt & Eisenberg, 2010).

The Learning Path addresses these challenges through interventions that **promote mental health and well-being via social inclusion**. Grounded in social psychology, the workshops cultivate community by creating **culturally sensitive** spaces that encourage **intercultural dialogue** and connection among individuals from diverse backgrounds. Simultaneously, it incorporates clinical psychology insights, using **cognitive-behavioral strategies** to equip participants with skills for self-care and prevention, as well as managing distress and enhancing well-being. These combined approaches create a learning path that develops (1) competencies, (2) practices, and (3) settings to enhance social inclusion for mental health promotion among university students and staff.

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Theoretical and methodological framework

As social beings, humans rely on meaningful relationships, and the quality of these connections significantly influences our mental health. Extensive research in public health, psychiatry, and psychology demonstrates that loneliness, social isolation, and exclusion not only contribute to poorer well-being, increasing the likelihood of mental health conditions and psychological distress, but also elevate mortality risk (Holt-Lunstad et al., 2015; Brandt et al., 2022). Some studies suggest that prolonged social isolation and loneliness may have health consequences comparable to, or even worse than, lifelong smoking (Holt-Lunstad et al., 2010). Given rising rates of loneliness and exclusion all over the world (WHO, 2025), addressing these issues must become a priority in health promotion efforts, particularly in higher education.

Conversely, **social connection and inclusion offer substantial mental health benefits**. Social psychology research indicates that group memberships shape identity, which, in turn, influences behavior and provides psychological resources such as meaning, belonging, and support (S. A. Haslam et al., 2009). This phenomenon, termed the "social cure," underscores how social bonds positively affect mental health across diverse populations worldwide (Jetten et al., 2012; Wakefield et al., 2019).

Despite this evidence, many people underestimate the importance of social relationships. Studies show that individuals often prioritize more visible health factors, such as smoking, physical activity, and weight, over relational well-being, even though social connectedness is one of the strongest predictors of long-term health and longevity (S. A. Haslam et al., 2018). Recognizing this, some psychological interventions now incorporate groups (C. Haslam et al., 2016) and social prescribing (Wakefield et al., 2020), using social connections to address issues as diverse as discrimination (Jay et al., 2021), depression (Cruwys et al., 2013), and brain injury recovery (Muldoon et al., 2018).

Drawing from these insights, the Learning Path develops targeted workshops to **enhance social inclusion and strengthen interpersonal connections within higher education communities**.

To guide this initiative, two theoretical frameworks are employed. The first builds upon **social identity theory**, using group-based activities to foster shared identity, mutual support, and cooperative goals, thereby improving well-being (Jetten et al., 2012; C. Haslam et al., 2016). The second adopts a **preventative approach**, focusing on reducing exclusion among vulnerable populations. These groups face an increased risk of developing mental health conditions while simultaneously encountering greater barriers to having their specific needs recognized and receiving appropriate care (Delgadillo, 2018). This underscores the necessity for health promotion professionals to cultivate intercultural competence and ensure their work environments are responsive to these concerns (Moleiro et al., 2018). To address this, the workshops incorporate principles o**f intercultural competence**, derived from multicultural counseling theory and implemented through the **AKS framework** (Awareness, Knowledge, Skills; Sue et al., 1992):

- **Awareness** involves self-reflection on personal biases and recognition of others' societal positions.
- **Knowledge** entails having information and understanding of diverse lived experiences and factors that perpetuate privilege and oppression, and their impacts on mental health.
- **Skills** refer to actionable strategies for creating inclusive environments and mental health-promoting strategies for all.

By combining the principles of the "social cure" with the AKS framework, the Learning Path aims to **leverage social inclusion as a health promotion strategy,** fostering academic communities where all members feel a sense of belonging.

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Facilitator's professional profile and requirements

- **Professional background:**
  - A background in psychology, social sciences, education, or related fields.
  - Have completed training or obtained certification in cultural competency, diversity and inclusion, or social justice frameworks.
- **Skills:**
  - Commitment to diversity, equity, and inclusion.
  - Active listening skills.
  - Strong communication, including conflict resolution and mediation.
  - Ability to create safe and engaging learning environments.
  - Adaptability to diverse group dynamics.
  - Self-awareness to examine biases and privileges.
- ***Experience:***
  - Proficiency in facilitating group discussions, workshops, or training sessions in educational, organizational, or community settings.
  - Experience working with and for individuals and groups from various backgrounds (particularly those from vulnerable, marginalized, or underserved communities).
  - Familiarity with the academic environment.

Health Promotion through Social Inclusion

Workshop 1 for Students: Social Inclusion Competences

Target group

From 8 to 25 university students currently enrolled in undergraduate or postgraduate programs (excluding PhD Programs), with a minimum of 2 facilitators.

Main objectives of the workshop

- Help students **recognize their potential biases and privileges** and understand their impact on well-being, both self and other.
- Provide insight into **systemic inequities**, power dynamics, and the sociopolitical factors shaping privilege and oppression.
- Equip students with practical skills to **mitigate and address invisibility, exclusion, and discriminatio**n.
- **Build understanding and solidarity** by emphasizing the value of diverse perspectives and collective well-being.
- **Empower students to promote diversity, equity, and inclusion** and contribute to healthier, more inclusive communities on campus and beyond.

Workshop itinerary

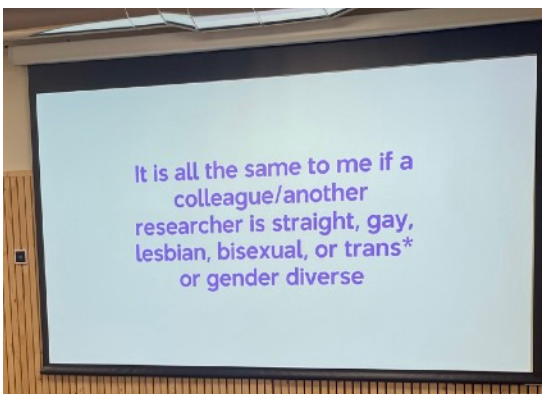
The workshop consists of **8 hours**, to be provided in 4 sessions of 2 hours each, with a flexible break within each session. Scheduling may depend on availability of trainers, group participants, and rooms (e.g. two consecutive mornings; one half-day in two consecutive weeks).

Session one: introduces participants to the workshop's structure and the objectives of the HEARTS Project. It begins with a presentation of the learning path and an agreement on participation guidelines. This is followed by an awareness-raising group activity that prompts a personal reflection and discussion on diversity, equity, and inclusion. The session concludes with a brief explanation of **multicultural counselling competencies and social justice models**, providing a theoretical foundation for understanding inclusion and equity.

Session two focuses on migration issues. Participants explore the migration landscape, followed by an **empathy exercise** to deepen their understanding of migrants' experiences.
Session three centers on raising awareness and building skills related to LGBTQ+ issues. It starts with an introduction to key concepts and challenges faced by LGBTQ+ communities.
Session four addresses the unique challenges faced by LGBTQ+ asylum seekers. A presentation provides an in-depth exploration of legal, social, and psychological barriers. Participants work on case studies to analyze real-world scenarios and develop collaborative action plans. The session concludes with reflections and feedback, tying together insights from the entire workshop.

The structure can be adapted to suit different contexts. The groups discussed and engaged in activities can be changed to other vulnerable and marginalized communities relevant to the current focus of the intervention. The idea is to take two different groups, explore some of their struggles and issues in more detail, as well as the necessary competencies to be able to address them, and then, in the final session, highlight **what happens at the intersection of these identities**. This approach emphasizes the role and importance of intersectionality.

KEY ACTIVITY: **SELF-AWARENESS THROUGH THE LINE EXERCISE**

🎯 **Objectives**	➡ Raise **awareness of intercultural issues** relevant to the target group. ➡ **Encourage dialogue** through moderated discussion, allowing participants to share diverse perspectives. ➡ **Bridge differences** by exploring varying viewpoints in a structured, respectful environment.
⏰ **When**	This activity should be conducted at the beginning of the first session of the workshop, following introductions and icebreakers, but before any knowledge-based sessions. Since the AKS prioritizes awareness-raising first, this exercise sets the tone for open discussion and prepares participants for deeper intercultural learning.
⏳ **Duration**	Approximately 60–90 minutes, depending on: • The number of prompts discussed. • The depth of participant engagement in each discussion. • Group size (larger groups may require more time for sharing).
	Implementation
👁 **Preparation**	For this activity you need a marker, white sheets of paper, colored/masking tape, PowerPoint slides with tailored prompts. Prepare the room by clearing obstacles and dividing the space with a strip of tape (colored or masking tape). Place two large sheets of paper on opposite sides—one labeled "Yes" (Agree) and the other "No" (Disagree).
👣 **Step-by-step Description**	The facilitator begins by reading **thought-provoking, ambiguous statements related to intercultural issues**, for instance: • "I hold no prejudices" • "Boys and girls are naturally different." • "Skin color should have no influence when we interact with others." • "Refugees need to adapt to the host country." 

	Participants then physically position themselves on the "Yes" or "No" side of the room, with their distance from the tape indicating their certainty: closer to the tape means less certainty ("I somewhat agree/disagree"), while farther away signals strong agreement/disagreement. Neutral positions are not allowed; participants must choose a side. The facilitator invites volunteers to **explain their stance**, moderating the discussion by highlighting commonalities, bridging differences, and gently de-escalating conflicts or correcting misconceptions if needed. This process repeats until all (or most) prompts are discussed.
💭 **Closing up**	Conclude with a group debrief to reflect on insights and key takeaways.
🔄 **Variations and adaptations to different conditions of participants**	• For participants with limited mobility, replace movement with hand signals (raised hand = agree, no hand = disagree) or colored cards (green/red) • For visual impairments, use verbal cues ("Say 'yes' or 'no'") or tactile markers. • For hearing impairments, provide prompts in writing or through assistive devices. If cognitive or emotional concerns arise, avoid triggering topics and allow opt-out options.
💡 **Comments and hints for facilitators**	The facilitator should adapt prompts to the group's cultural context and workshop objectives, while steering clear of unfamiliar topics to prevent misinformation. They need to stay attuned to emotional reactions, pausing or rephrasing discussions if needed. The facilitator should **prioritize open dialogue over debate**, focusing on mutual understanding and clarifying that there are no right or wrong answers, only learning opportunities and promotion of self-knowledge. They should reinforce shared values to build rapport and set ground rules in advance for sensitive topics, such as respectful listening and respectful language in expressing points of view.

Health Promotion through Social Inclusion

Workshop 2 for Staff: Social Inclusion Practices

Target group

From 8 to 25 participants, both academic (including PhD students) and non-academic staff currently employed at the university, with a minimum of 2 facilitators.

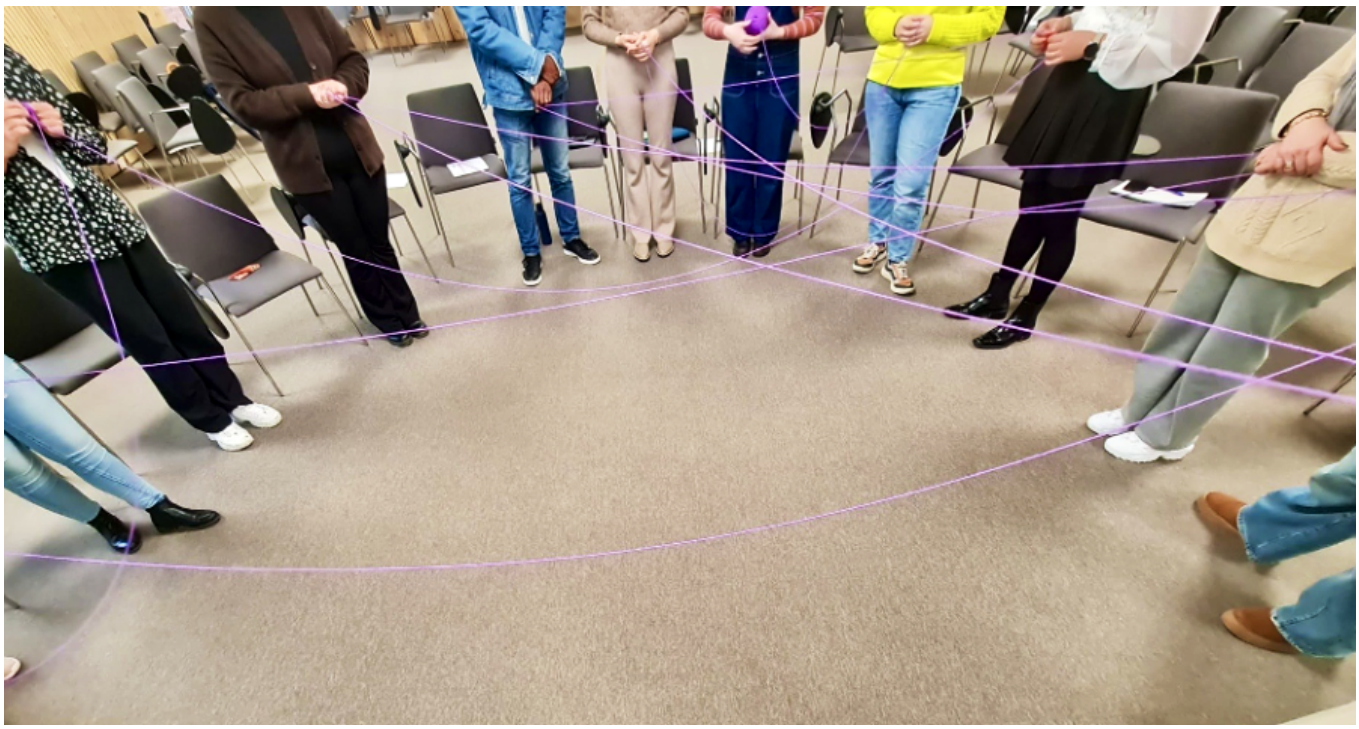
Main objectives of the workshop

- ✓ Help recognize **how language impacts Individual and group well-being** by shaping the university environment, practices, and outputs.
- ✓ Raise awareness on how **biases and power dynamics** influence university practices, language, and one's work.
- ✓ Educate on how biases and power dynamics influence one's behavior and well-being within the work environment.
- ✓ Equip staff with tools to **integrate inclusive language in everyday interactions**, university processes, and in their work.

Workshop itinerary

The workshop consists of 8 hours, to be provided in 2 sessions of 4 hours each, with a flexible break within each session. Scheduling may depend on availability of trainers, group participants, and rooms (e.g. two consecutive mornings; one half-day in two consecutive weeks).

Session one introduces participants to the workshop's objectives and the HEARTS Project, emphasizing the importance of fostering inclusive practices in university settings. It starts with an overview of the learning path and guidelines for participation. An icebreaker activity helps participants connect and create an engaging, safe, and inclusive environment. An awareness-raising exercise follows, encouraging discussion and reflection on personal experiences with diversity, equity, and inclusion. After a short break, participants engage with **being aware and recognizing their privilege**, an activity designed to increase awareness of the advantages and disadvantages individuals may experience. The session concludes with two moments: one on **social justice competencies** and another on understanding and **addressing privilege and bias** from an inter-group relations perspective, providing theoretical insights and practical strategies.



Session two begins with a recap and an icebreaker to re-energize participants and foster collaboration. Then, participants are asked to partake in an **exercise about social dynamics** to deepen their understanding of inclusion and exclusion, and their impacts on well-being and/or experienced distress. A presentation on inclusive language and research practices follows, offering best practices for presenting and reporting academic work with inclusivity in mind. After a break, the session focuses on strategies to recognize and reduce bias in academic settings. The session concludes with a case study activity, where participants collaboratively explore strategies for improving representation, visibility, and reducing bias in real-world academic scenarios. A wrap-up and evaluation provide space for participants to reflect on their learnings and share feedback.

KEY ACTIVITY: **INTER-GROUP RELATIONS WITH THE COLORS EXERCISE**

🎯 **Objectives**	➡ **Simulate inclusion/exclusion dynamics** in a controlled, safe environment. ➡ Raise awareness about how (socially construed) characteristics (e.g., assigned colors) can influence **feelings of belonging or marginalization.** ➡ Spark reflective discussion on **group dynamics, biases, and behavioral responses to inclusion/exclusion**, and how these impact the well-being of individuals and groups.
⏰ **When to do the activity**	This activity works best as an introductory awareness exercise. This can take place during the first session (after introductions and icebreakers) or, alternatively, at the beginning of the second session once participants are more comfortable with each other, enabling deeper engagement.
⏳ **Duration**	Approximately 60 minutes in total: 20-40 minutes for the active exercise, and 10-20 minutes for debriefing and discussion.
	Implementation
👁 **Preparation**	For this activity the following materials are needed: • Colored paper strips (green, red, blue, yellow) for group assignment. • Proportions: For every 5 green, 3 red, 2 blue, and 1 yellow (adjust for group size). • Color-coded rule strips (*see Annex in this table activity)*: Pre-cut, folded, and stapled (one set per participant; similar rules of each color). • Opaque bag/container for random color distribution. • Tape or clips (for attaching colors to clothing). • Master list of rules (to distribute post-activity). Prepare the room to ensure ample space for movement exists and remove any obstacles.
👣 **Step-by-step Description**	The activity starts by randomly distributing colors through an opaque bag, with participants taping their assigned color visibly to their clothing. Each participant then receives five color-specific rules (folded and stapled), with instructions for five specific 5-minute moments. Participants are instructed not to share or discuss the rules they are handed. During execution, participants silently follow their rules line by line (e.g., "1. Hold hands with greens only") as the facilitator cues transitions every 5 minutes, closely observing interactions while maintaining neutrality.
💭 **Closing up**	Conclude with a debrief discussing each color's experience chronologically, exploring emerging metaphors, emotions, and dynamics, while highlighting key observed moments.
🔁 **Variations and adaptations to different conditions of participants**	To accommodate diverse needs, modify physical actions for mobility limitations (e.g., "stand near" instead of "hold hands"), replace gestures with verbal cues for sensory/communication needs (e.g., "say hello" rather than waive), and provide written instructions when necessary. For emotional safety, avoid assigning the most excluded 'yellow' role to minority-group members to prevent re-traumatization.

💡Comments and hints for facilitators

The "yellow" role (most exclusion condition) must appear randomly assigned, but facilitators should discreetly ensure it is not given to participants from stigmatized or marginalized minority groups who are isolated in the workshop, as this could be emotionally triggering.

The facilitator should **observe the group dynamics carefully** and adjust the timing between rule transitions accordingly - speed up if energy is fading or if a moment appears to be very distressing, or slow down if meaningful interactions are developing. During debriefing, they might actively acknowledge and **validate participants' emotional experiences** while helping to moderate any intense reactions, helping participants emotionally regulate (if needed).

Rules should be presented minimally, allowing participants to interpret and enact them in their own way without excessive guidance.

Annex

Green

1. Hold hands with other greens only. Do not allow other colors to hold hands with you.
2. Talk with other greens only. If other colors attempt to talk with you, turn your back on them.
3. Form a circle and only allow other greens to join the circle.
4. Take yellow's color, form a circle, and don't allow yellow to join the circle.
5. Form a group with other greens only.

Red

1. Hold hands with all other colors.
2. Talk with all other colors.
3. Form a circle with all other colors.
4. Take yellow's color, form a circle, and don't allow yellow to join the circle.
5. Cross your arms, and join a group only if invited.

	Blue 1. Hold hands with only green, blue or yellow. 2. Talk with only blue or green if other colors attempt to talk with you, turn your back on them. 3. Form a circle with the other colors. 4. Take yellow's color, form a circle, and don't allow yellow to join the circle. 5. Invite other blues or someone with crossed arms to join your group.
	Yellow 1. Hold hands only with green. 2. Talk with blue or green if other colors attempt to talk with you, turn your back on them. 3. Form a circle with the other colors. 4. Show your color to all other colors. 5. Raise your right hand and waive at the groups, join one if invited.

Health Promotion through Social Inclusion

Workshop 3 for Students and Staff: Wellness-Fostering Health Promoting Settings in HE

Target group

From 8 to 25 participants with a minimum of 2 facilitators. Participants can be students currently enrolled in undergraduate or postgraduate programs, as well as both academic (including PhD students) and non-academic staff currently employed at the university. A strong group combination can be undergraduate and master's students combined with PhD candidates and junior research assistants, as they may face similar struggles within higher education contexts.

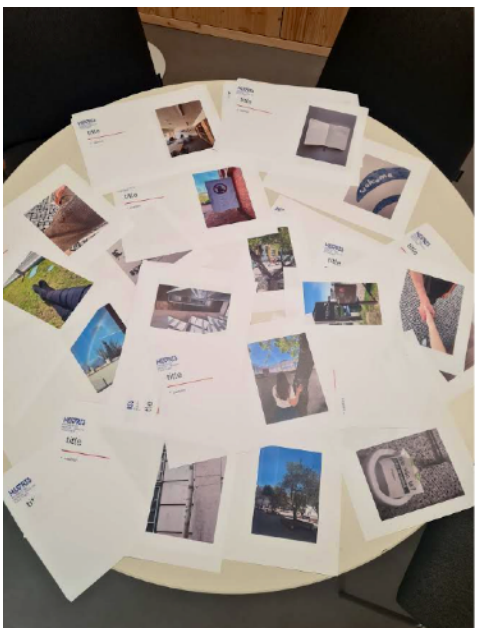
Main objectives of the workshop

- ✓ **Discuss challenges and enablers for health and well-being** within higher education environments.
- ✓ Learn and apply PhotoVoice methodology (photography + storytelling) to document experiences and **drive change** for more health-promoting and socially inclusive settings.
- ✓ **Explore mental health in academia**, including systemic issues and practical solutions.
- ✓ **Develop self-care strategies** to manage stress, prevent burnout, and promote personal wellness.

Workshop itinerary

This workshop comprises **8 hours delivered across 2 consecutive days**. Each 4-hour session combines theory, participatory activities, and reflective practice to address mental health in academia through the PhotoVoice methodology.

Session one begins with a warm welcome and introduction to the goal of the workshop. An icebreaker activity then follows to help establish rapport before transitioning into a presentation on systemic challenges like PhD/academic burnout, anxiety, and depression. This then continues by opening the floor for a candid discussion about **institution-specific psychosocial challenges** faced by students and staff. The session then introduces PhotoVoice as a tool for advocacy, guiding participants through symbolic photography exercises to capture both positive and negative influences on their mental health. The day concludes by giving participants the chance to analyze their photos' connections to broader institutional themes.



Session two opens with a recap of key concepts before participants select their most impactful photos, one representing a positive influence and another a negative one. Working collaboratively, they organize these images into emergent themes such as heavy workload, bureaucratic and administrative barriers, accessibility and inclusion policies, green spaces, and support systems. The workshop shifts to narrative development, teaching caption-writing techniques to amplify the photos' messages. After planning a potential exhibition to disseminate their findings, participants engage in mapping their university's existing mental health resources and tools, helping them identify and discuss critical gaps within these systems. The session closes with **co-creating actionable strategies for burnout prevention** and institutional change, followed by a final Q&A and evaluation.

Activity duration will depend on the number of participants. If the group is larger, the facilitator may opt to provide a shorter overview of mental health services and brief self-care strategies for burnout prevention at the end of the second session, allowing more time for each group to work on the PhotoVoice methodology.

KEY ACTIVITY: **MAPPING MENTAL HEALTH BARRIERS, RESOURCES, AND SOLUTIONS**

🎯 **Objectives**	➡ Identify and **discuss systemic barriers and facilitators affecting mental health** in higher education. ➡ **Develop problem-solving strategies** by analyzing case studies/vignettes of mental health challenges. ➡ **Map institutional resources** by reviewing university mental health services (from prevention to intervention). ➡ Promote **self-care practices and burnout prevention** through evidence-based tools and peer discussions. ➡ **Address barriers to social inclusion** by sharing and co-creating strategies for a more accessible and equitable health-promoting university environment.
⏰ **When**	This activity is best suited for the end of day 2 of the workshop and can effectively serve as a wrapping-up exercise, giving participants time to discuss and also provide them with concrete activities and information to take home.
⏳ **Duration**	Approximately 60-90 minutes total: 20-30 minutes of an initial discussion of mental health enablers and barriers at the university, 20-30 minutes of working in small groups with a case studies or vignettes, and the remaining 20-30 minutes presenting information about the mapping of the mental health services and resources and tools available at their higher education institutions.
	Implementation
👁 **Preparation**	This activity creates a structured space for students and staff to discuss barriers and facilitators affecting mental health in higher education settings, including factors that prevent, foster, or exacerbate well-being (e.g., no/limited mental health resources at university, environment of competition, heavy workloads, free access to gym and sports facilities). For this activity, the following materials are needed: printed case studies (1 per small group), a whiteboard or paper notes, and a PowerPoint presentation showing Campus mental health services, available support resources and burnout prevention tips.
👣 **Step-by-step Description**	Begin with a whole-group discussion (20-30 minutes) to share personal experiences and identify key themes. Next, divide participants into small groups and distribute **printed case studies or vignettes about mental health challenges in academia** (e.g., navigating difficult relationships with teachers or supervisors, managing acculturative stress as an international student as you arrive, experiencing discrimination at university by witnessing homophobic or transphobic comments within or outside classes, coping with isolation in the competitive environment and heavy workload as a Ph.D. student).
	Each group spends 20-30 minutes analyzing their assigned scenario, proposing solutions, and evaluating existing support systems. Finally, bring everyone back together for 20-30 minutes: have groups share their case scenarios and suggested ideas for resources and solutions. Show a slide with the university's mental health resources (e.g., counseling services or stress management tools), and discuss burnout prevention tips.

💭 **Closing up**	End with an open conversation about how to use the provided resources.
🔄 **Variations and adaptations to different conditions of participants**	• Instead of using a slide deck to present university resources, facilitators can invite key university stakeholders related to health and mental health services to talk about these topics (e.g., student mental health ambassadors or staff members responsible for managing mental health programs for students and employees). • Rather than dividing participants into small groups to discuss case studies or vignettes, the activity can be adapted for full-group discussion of a specific event (either real or hypothetical).
💡 **Comments and hints for facilitators**	The facilitator should map resources in advance, by either obtaining the university's mental health service mapping or consulting directly with staff who know these resources, ensuring information is actionable and up-to-date. Contents should be tailored and evidence-based: all burnout prevention/self-care strategies must be grounded in research (e.g., cognitive behavioral strategies), and case studies must address and be relevant to the needs of the participants, such as staff (e.g., workplace pressures), PhDs (e.g., supervisor relationships and publication culture), and undergraduates/master's students (e.g., career guidance and transitioning to higher education).

HEARTS

LEARNING PATH

HEALTH PROMOTION THROUGH MINDFULNESS & RESILIENCE (HPMR)

L-Università ta' Malta
Centre for Resilience &
Socio-Emotional Health

Health Promotion Through Mindfulness & Resilience (HPMR)

Learning Path by Centre for Resilience and Social and Emotional Health (CRES-UM) at University of Malta

General approach of the learning path

This learning path integrates **culturally sensitive cognitive-behavioural therapy, mindfulness practice, and systemic resilience-building strategies** to support wellbeing in higher education. It draws from both individual and community-based approaches, enhancing students' and staffs' emotional awareness, stress regulation, and connection through creative and reflective exercises.

This blended approach is inspired by mindfulness-based interventions (MBIs), such as music-based therapies, and ecological models of resilience (Ungar, 2020; Masten, 2018). These frameworks emphasise the importance of fostering self-awareness, self-regulation, and meaning-making through individual capacities and environmental support. The learning path aligns with a person-centred, experiential approach, offering an inclusive space for exploring internal experiences and shared group learning.

Theoretical and methodological framework

Resilience is increasingly understood as a dynamic and multisystemic process. It encompasses the interplay between personal attributes, such as emotional regulation, self-efficacy, and positive thinking, and contextual supports, including community networks, institutional inclusivity, and social systems (Ungar, 2020). Higher education settings thus play a pivotal role in promoting student and staff wellbeing by fostering safe, inclusive, and empowering environments.

Mindfulness-based and creative approaches (Kabat-Zinn, 1990; Brown, 2014) facilitate self-exploration and growth through presence, expression, and reflection. **Music therapy techniques** and **sound-based activities** provide non-verbal pathways for engaging with emotions and the present moment, allowing individuals to connect more deeply with themselves and others. Activities such as guided sound journeys, resilience mapping, and collective soundscapes offer participants opportunities to identify challenges, regulate stress responses, and envision change.

Bibliography

Kabat-Zinn, J. (1990). *Full Catastrophe Living*. Delta.

Brown, N. W. (2014). *Creative Activities for Group Therapy*. Springer Publishing Company.

Grocke, D., & Wigram, T. (2007). *Receptive Methods in Music Therapy*. Jessica Kingsley Publishers.

Masten, A. S. (2018). *Resilience theory and research on children and families: Past, present, and promise*. Journal of Family Theory & Review, 10(1), 12-31. https://doi.org/10.1111/jftr.12255

Ungar, M. (2020). *Multisystemic Resilience: Adaptation and Transformation in Contexts of Change*. Oxford University Press.

Facilitator's professional profile and requirements

- **Professional background:**
  - Psychologists (or practitioners within a related field), mindfulness practitioners, group facilitators.
- **Skills:**
  - Group facilitation skills, trauma-informed practice, grounding and mindfulness techniques, and ability to lead music-based or sensory wellbeing activities.
- ***Experience:***
  - Prior experience leading mindfulness or music therapy workshops, group-based wellbeing or mindfulness interventions, working with diverse populations, and facilitating psychoeducational and reflective group processes.

Health Promotion through Mindfulness & Resilience (HPMR)

Workshop 1 for Students: Mapping Risks and Resources

Target group

From 10 to 16 university students, with a minimum of 2 facilitators.

Main objectives of the workshop

- ✓ Share a **common definition of wellbeing** and health among participants.
- ✓ Develop individual skills in becoming **self-aware** of one's well-being and **self-care.**
- ✓ **Recognise health resources** within one's relational network and learning environment.
- ✓ Promote students' **growth mindset**, agency, and sense of belonging.
- ✓ Empower students to identify and challenge **systemic and environmental barriers** to wellbeing on campus.

Workshop itinerary

The workshop consists of **4 sessions of 2 hours** each and may be delivered as **one full-day session or split across 2 half-days**. Splitting the sessions allows more time for reflection between activities, helping participants to process insights, revisit emerging themes, and deepen engagement with the material. It supports students in exploring personal wellbeing, identifying barriers to inclusion on campus, and developing practical strategies for fostering a safer, more supportive learning environment.

Session one: Orientation & Shared Definitions (2 hours)

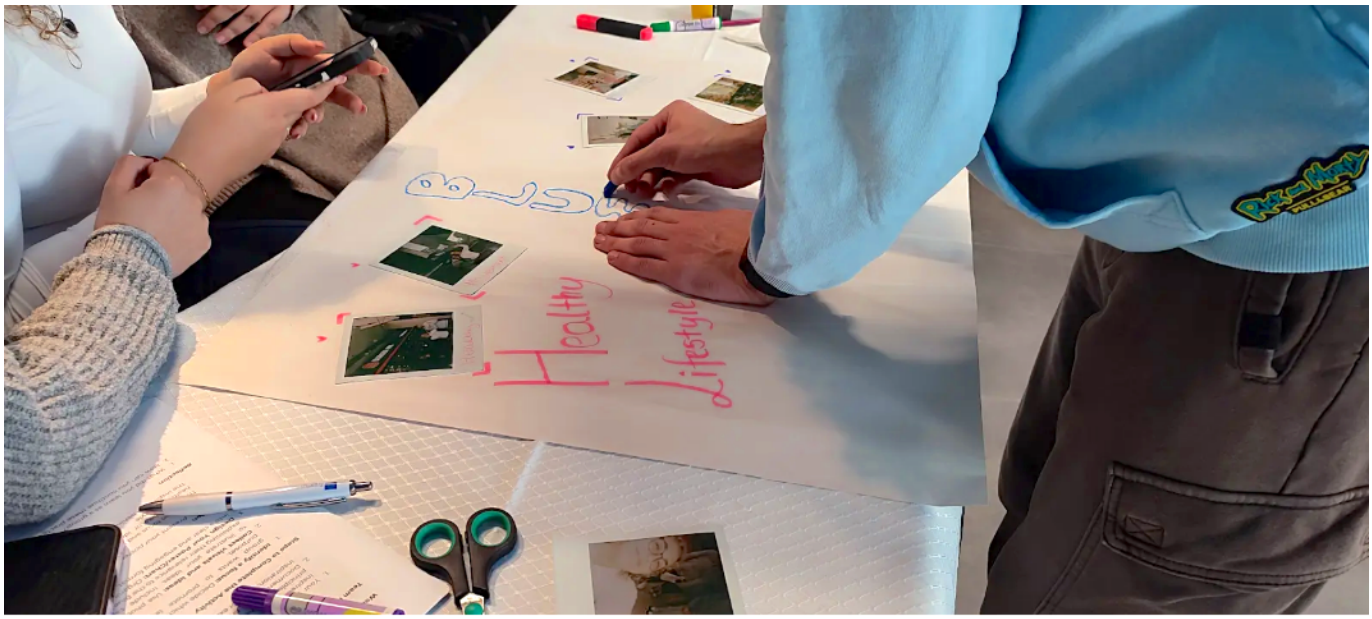
The workshop begins by establishing a shared understanding of its aims and values. Participants are welcomed and invited to co-create a group agreement that outlines mutual expectations for safety, confidentiality, and respect. An engaging icebreaker helps build trust and cohesion, setting the tone for a participatory and reflective day.

A guided reflection prompts students to **consider their own definitions and experiences of wellbeing and health**. Using frameworks from the World Health Organization, participants then work together in small groups to explore how cultural, social, and personal factors shape these definitions. This session lays the foundation for shared language and purpose throughout the workshop.

Session two: Mapping Barriers & Risks (2 hours)

This session centres around a key participatory activity: "Campus Map and Risk Zones". Students are invited to visually map their university campus, identifying **spaces where they feel safe, included, or excluded**. Physical, emotional, and social risks, such as isolation, harassment, or inaccessible services, are plotted and discussed.

Through group dialogue, students reflect on how different identities and backgrounds may influence experiences of exclusion or stress on campus. The activity highlights the systemic nature of many wellbeing challenges and encourages a collective exploration of how the learning environment might be reshaped to promote inclusion and belonging.



A 30-minute break follows this session to allow for rest and informal reflection.

Session three: Recognising Resources & Support Systems (2 hours)

In the third session, the focus shifts from challenges to strengths. Participants map out existing **wellbeing resources** both on and off campus, including formal supports such as counselling services, and informal networks such as peer groups or trusted staff members.

Through peer-sharing, students explore the coping strategies and support systems they rely on. Facilitators introduce the concepts of **self-care and community care**, emphasising the importance of collective responsibility and relational wellbeing in academic settings.

Session four: Action Planning & Empowerment (2 hours)

The final session focuses on translating insights into action. Participants work in small groups to brainstorm practical changes that could enhance wellbeing at the personal, peer, and institutional levels. These ideas may include awareness campaigns, advocacy for more inclusive services, or the creation of peer-led support spaces.

Each student develops an **individual wellbeing action plan**, identifying concrete steps they can take following the workshop. The session concludes with small group presentations, feedback, and a reflective closing circle. This offers an opportunity for participants to integrate their learning, express commitments, and contribute to the shared goal of a safer, more caring university campus.

KEY ACTIVITY: **REMOVING RISKS AND BARRIERS TO FOSTER A SAFE, INCLUSIVE AND CARING CAMPUS**

🎯 **Objectives**	➡ Develop awareness of how physical, social, and emotional **campus environments affect wellbeing** ➡ Identify areas of exclusion, risk, and support within students' university contexts ➡ Encourage **active reflection and dialogue** around inclusion and equity ➡ Lay the groundwork for **collective action** and student-led recommendations
⏰ **When**	The activity can be delivered in different moments of the workshop: • Introduced early in the first session as a warm-up and grounding tool • Built upon during the mid-point of the workshop through group reflection and expansion • Concluding the final session with recommendations and action planning
⏳ **Duration**	120 minutes. The activity can be delivered as part of the workshop or be offered as a full-day activity, including an on-site visit to the campus.
	Implementation
👁 **Preparation**	**Draw a map of the campus** where you are studying as a university student (or print the official campus map). Include the main areas such as: • Lecture halls • Administration buildings • Library • Canteens • Bathrooms • Sports venues • Residence areas • Study areas (closed/open) • Student services area (health/counselling/ etc) • Prayer areas • Student organisations areas • Common open areas
👣 **Step-by-step Description**	The facilitator asks the group to identify on the map all of the **potential barriers and risks** which may be present in each area e.g. sources of stress, areas of exclusion and ostracisation, hotspots of discrimination, bullying and harassment, etc During the activity, the facilitator suggests ways on how the potential stress and risk areas may be removed so that the campus may operate as a more safe, inclusive, supportive and caring learning and social environment for all students. Discussion is encouraged in small and big groups, reflecting also on the following questions: • Were you surprised by the number of barriers/risks that you were able to identify in your own university campus map?

	• How might you go about **removing or minimising the risks/barriers identified** in the campus map? • How might your university remove such risks and barriers and operate as a **safe, supportive, inclusive and caring environment** for all students irrespective of cultural, socio-economic or ethnic background or individual differences?
🔄 **Variations and adaptations to different conditions of participants**	To ensure accessibility and inclusivity, this activity may be adapted to support participants with fewer opportunities or diverse needs, including those with disabilities, refugee or migrant backgrounds, trauma histories, or those facing social or economic marginalisation. • **Mobility**: Participants using wheelchairs or with limited mobility can engage by using verbal description, symbolic gestures, or visual mapping tools instead of physical movement. • **Sensory needs**: Provide visual alternatives to sound or touch for neurodivergent participants. Allow for stimulus-free spaces or quiet zones for anyone experiencing sensory overwhelm. • **Language support**: Use simple and inclusive language. Offer translations or bilingual support where possible. Peer support pairing may also help where language barriers exist. • **Trauma-sensitive delivery:** Emphasise voluntary participation. Allow participants to opt out of physical engagement or sharing personal reflections. Include trigger warnings if discussing exclusion or discrimination. • **Technology and literacy considerations**: If printed maps or drawing tools are not suitable, offer pre-printed outlines, stickers, or digital alternatives on accessible devices. • **Cultural relevance**: Encourage personal interpretations of "safe" and "inclusive" spaces, allowing participants to define these in a way that reflects their own values and lived experiences.
💡 **Comments and hints for facilitators**	It may be useful to conclude the session by debriefing participants on the **mind–body connection**, inviting students to notice how their energy or emotional state may have shifted. The facilitator may frame the activity within a creative and reflective space, drawing on **expressive and theatrical techniques** to foster openness, and begin with a brief warm-up or grounding activity to help participants tune into their body and emotional state before engaging. It is important to **emphasise the non-judgmental nature of the task,** clarifying that there are no right or wrong answers and that the aim is awareness and reflection, not problem-solving, at this stage. In order to support students who may struggle to begin, the facilitator can offer scaffolding prompts (e.g. "Where do you go when you feel anxious?" or "What space helps you feel included?") and encourage group sharing, but at the same time allow individuals to pass or observe if they prefer not to speak. Attention must be paid to signs of discomfort or disengagement, particularly among participants from vulnerable or marginalised groups, in order to check in privately if needed.

Health Promotion through Mindfulness & Resilience

Workshop 2 for Staff: Health and Wellbeing Wheel

Target group

From 8 to 16 staff members of the university, with a minimum of 2 facilitators.

Main objectives of the workshop

- ✓ Enhance **understanding of holistic wellbeing** through the Health and Wellbeing Wheel framework.
- ✓ Facilitate **self-reflection on current lifestyle patterns** and identify areas for growth.
- ✓ Empower university staff to establish **personal and professional wellbeing goals.**
- ✓ **Foster a supportive environment** for sharing experiences and wellbeing strategies.
- ✓ Promote **practical steps towards sustainable wellbeing** in academic and administrative contexts.

Workshop itinerary

This workshop consists of **4 sessions** of 2 hours and may be delivered as a full day or split across 2 half-days. Splitting the sessions can enhance reflection, allowing participants to internalise insights and apply strategies between sessions. It invites university staff to explore holistic wellbeing through reflective, interactive activities using the Health and Wellbeing Wheel, with a focus on self-awareness, connection, and actionable goal-setting.

Session one: Foundations of Wellbeing *(2 hours)*

The workshop opens by establishing a shared understanding of wellbeing and group values. Participants are welcomed and invited to contribute to a group agreement, fostering a safe and collaborative space. An introductory icebreaker encourages trust and bonding.

Facilitators introduce **key health promotion concepts** relevant to the academic environment, followed by an overview of the Health and Wellbeing Wheel. Participants begin to reflect on their current lifestyle, identifying initial thoughts on their own wellbeing across different domains.

Session two: Personal Mapping and Goal Setting *(2 hours)*

The second session focuses on the core activity of completing the **Health and Wellbeing Wheel**. Participants explore seven interconnected domains—physical, intellectual, emotional, social, spiritual, environmental, and professional wellbeing—identifying personal strengths and challenges in each.

Building on this self-assessment, participants set **specific wellbeing goals** within each domain. These goals are then shared in pairs or small groups, allowing for feedback, encouragement, and a sense of accountability. This

session fosters ownership of wellbeing and highlights the importance of balance and intentional living.
A 30–45 minute break follows this session.

Session three: Shared Challenges and Collective Strategies *(2 hours)*

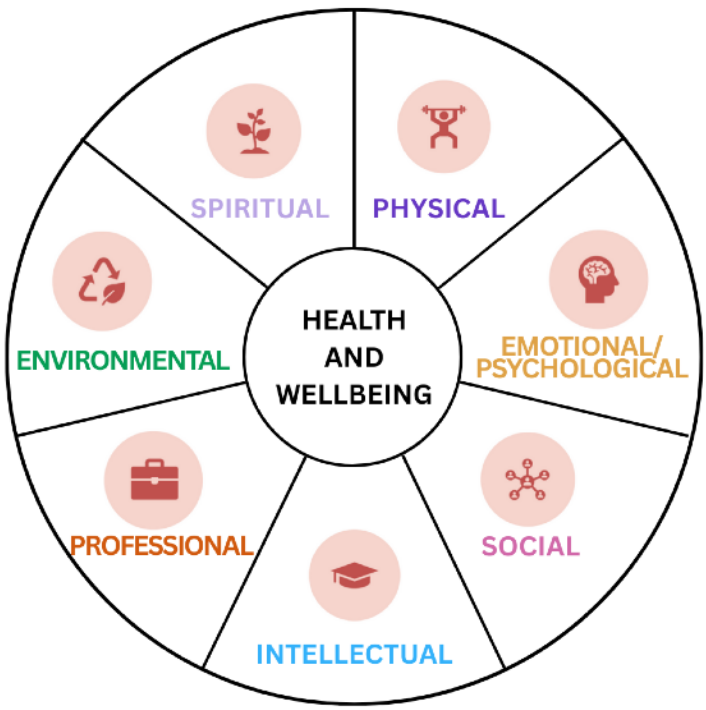
In this session, the focus shifts from individual reflection to collective insight. Through group discussions, participants identify both institutional and personal barriers to wellbeing in the academic setting.
Brainstorming activities encourage the generation of practical **strategies to create a healthier work environment**. A peer-coaching segment offers staff the opportunity to support each other in planning the implementation of their goals, sharing best practices, and offering mutual guidance in a collegial space.

Session four: Integration and Commitment *(2 hours)*

The final session invites participants to consolidate their learning and reflect on their journey. They take part in action planning and accountability exercises, reinforcing their commitment to **realistic and sustainable changes**.

The workshop concludes with a reflective activity on lessons learned, a short mindfulness or grounding practice to foster closure, and the distribution of additional resources. A group debrief allows for shared insights and evaluation, reinforcing a sense of **collective investment in wellbeing** across the academic community.

KEY ACTIVITY: **HEALTH AND WELLBEING WHEEL**

🎯 **Objectives**	➡ Support participants in **mapping out their personal wellbeing** across multiple life domains. ➡ Encourage reflection on **individual strengths** and **areas for development**. ➡ Promote **goal-setting** to enhance health-promoting behaviours. ➡ Foster **self-awareness** of the interplay between physical, mental, social, and professional well-being. ➡ **Create a shared language around holistic wellbeing** in the academic community.
⏰ **When**	Start of Session one, after a brief introduction to the importance of health promotion
⏳ **Duration**	120 minutes
	Implementation
👁 **Preparation**	Set a quiet room with chairs set in a circle or small groups. Provide printed copies of the Health and Wellbeing Wheel, coloured pens, and plain paper for goal planning and reflections. Optional background music can help create a calming atmosphere.
👣 **Step-by-step Description**	The facilitator explains the **Health and Wellbeing Wheel** (*see Annex X*) and how health and wellbeing consist of various interconnected areas such as physical, mental, social, cognitive and spiritual wellbeing.
	 **Download the wheel here**

	• **Physical**: Leading a healthy lifestyle: diet, nutrition, sleep/rest, physical exercise, avoidance of substance use. • **Intellectual**: Learning new things and using one's creativity and strengths to take on new challenges (academic studies and learning, cultural involvement, community involvement, hobbies). • **Emotional/Psychological**: Self-awareness, coping effectively with life challenges, regulating emotions, positive thinking. • **Social**: Forming and maintaining healthy, as well as developing supportive relationships, respect for others, including those coming different cultures, and playing an active role in the community. • **Spiritual**: Finding a sense of meaning and purpose, which provides a sense of direction in life. • **Environmental**: Leading a lifestyle that values and respects the relationship between oneself, the community and the environment (nature/our planet). • **Professional**: Finding satisfaction, meaning and fulfilment in work/career (including work-life balance, managing stress).
	Participants are encouraged to **identify from one to three goals they would like to achieve in each of the 7 areas of well-being**, and list the step/s they could take to bring these goals closer to reality Then, they discuss in pairs/small group and reflect on the following questions: • How did you find the process of seeking to make these changes in your life to enhance your wellbeing? • What are the challenges you envision in making such changes? How might such challenges be addressed? What did you find would help plan such changes in your life? • What did you learn about yourself from trying to make these changes in your life?
🔄 **Variations and adaptations to different conditions of participants**	• **Accessibility**: Provide printed and digital versions of the Health and Wellbeing Wheel in large font or audio-described formats. • **Language support**: Offer translated terms for participants with limited proficiency in English. • **Cultural relevance**: Invite participants to adapt domains to better reflect their personal or cultural frameworks (e.g., community/family wellbeing). • **Trauma sensitivity**: Allow participants to skip domains they find distressing and assure them that sharing is optional. • **Time constraints**: Condensed 60-minute versions can be run by focusing on 3–4 key wellbeing areas.
💡 **Comments and hints for facilitators**	The facilitator should adopt a non-judgmental, explorative tone throughout the session and **encourage confidentiality and voluntary sharing** in group discussions. They could prepare and provide examples to illustrate each domain for clarity. The facilitator should be attentive to staff who may feel burned out or disconnected, offering validation and appropriate follow-up resources, and provide contact details for support services (e.g., university wellbeing staff) available at the end of the session.

Health Promotion through Mindfulness & Resilience (HPMR)

Workshop 3 for Students and Staff: Mindfulness through Music

Target group

From 8 to 16 staff members of the university, with a minimum of 2 facilitators.

Main objectives of the workshop

- ✓ Promote **present-moment awareness** as a foundation for emotional wellbeing.
- ✓ **Foster emotional insight** and self-awareness through mindful listening and reflection.
- ✓ Strengthen the capacity for **emotional regulation and stress management**.
- ✓ Support **self-expression and meaning-making** through guided creative processes.
- ✓ **Cultivate a sense of connection and empathy** through shared experiences.

Workshop itinerary

This workshop introduces students and staff to **mindfulness through music**, using guided listening, reflection, and creative expression to support emotional awareness, stress regulation, and present-moment connection. It includes an introduction to mindfulness and music as a therapeutic tool, which may draw on a guided listening exercise (e.g. see YouTube link: *Mindful Listening*[8] *or ambience music*), reflective journaling and group discussion. This workshop consists of **4 sessions of 2 hours** and may be delivered as one full day or across 2 half-days. Splitting the sessions can enhance reflection, allowing participants to internalise insights and apply strategies between sessions.

Session one: Introduction to Mindfulness and Sound *(2 hours)*

The first session opens with a welcome and the creation of shared group guidelines. Participants are introduced to the **foundational principles of mindfulness**, including non-judgement, present-moment awareness, and self-compassion.

A **grounding activity** such as a body scan or mindful breathing prepares participants for deeper engagement. The session continues with an introduction to the **therapeutic potential of music**, followed by a first reflective exercise that explores emotional responses to different sounds. This helps attune participants to their internal states and sets the stage for more focused listening.

Session two: Guided Listening and Reflection *(2 hours)*

The second session features the workshop's key activity: "Mindful Listening". Using a pre-selected instrumental track (e.g. ambient or meditative music), participants are guided through a **listening experience** with prompts to observe emotional, physical, and sensory reactions.

[8] https://youtu.be/qCMbAJ8YXqA?si=T_qXQuR51pN3usiy

After listening, participants engage in reflective journaling to process their experience, followed by optional sharing in pairs or small groups. The activity fosters **emotional regulation** and encourages non-verbal self-exploration, allowing individuals to **reconnect with inner experiences** in a gentle and supported manner.

A 30–45 minute break follows this session.

Session three: Creative Integration and Expression *(2 hours)*

In the third session, participants are invited to respond creatively to their experiences. Artistic activities such as drawing, sound-making, or movement offer an open-ended way to express what emerged during the listening practice.

Facilitators lead a group discussion on how **creativity can support emotional insight and wellbeing**. Participants explore how different methods of expression can help process emotions and foster connection. The session concludes by introducing music as a regular tool for mindfulness and self-care.

Session four: Application and Closing *(2 hours)*

The final session encourages participants to consider how they might apply what they've learned beyond the workshop. Through individual reflection and group dialogue, they identify **personal strategies and intentions for incorporating mindfulness and music into daily life**.

A closing circle invites participants to share insights, intentions, or takeaways. The workshop ends with a brief grounding practice and a feedback and evaluation segment, reinforcing the importance of continued self-awareness and community care in wellbeing practices.

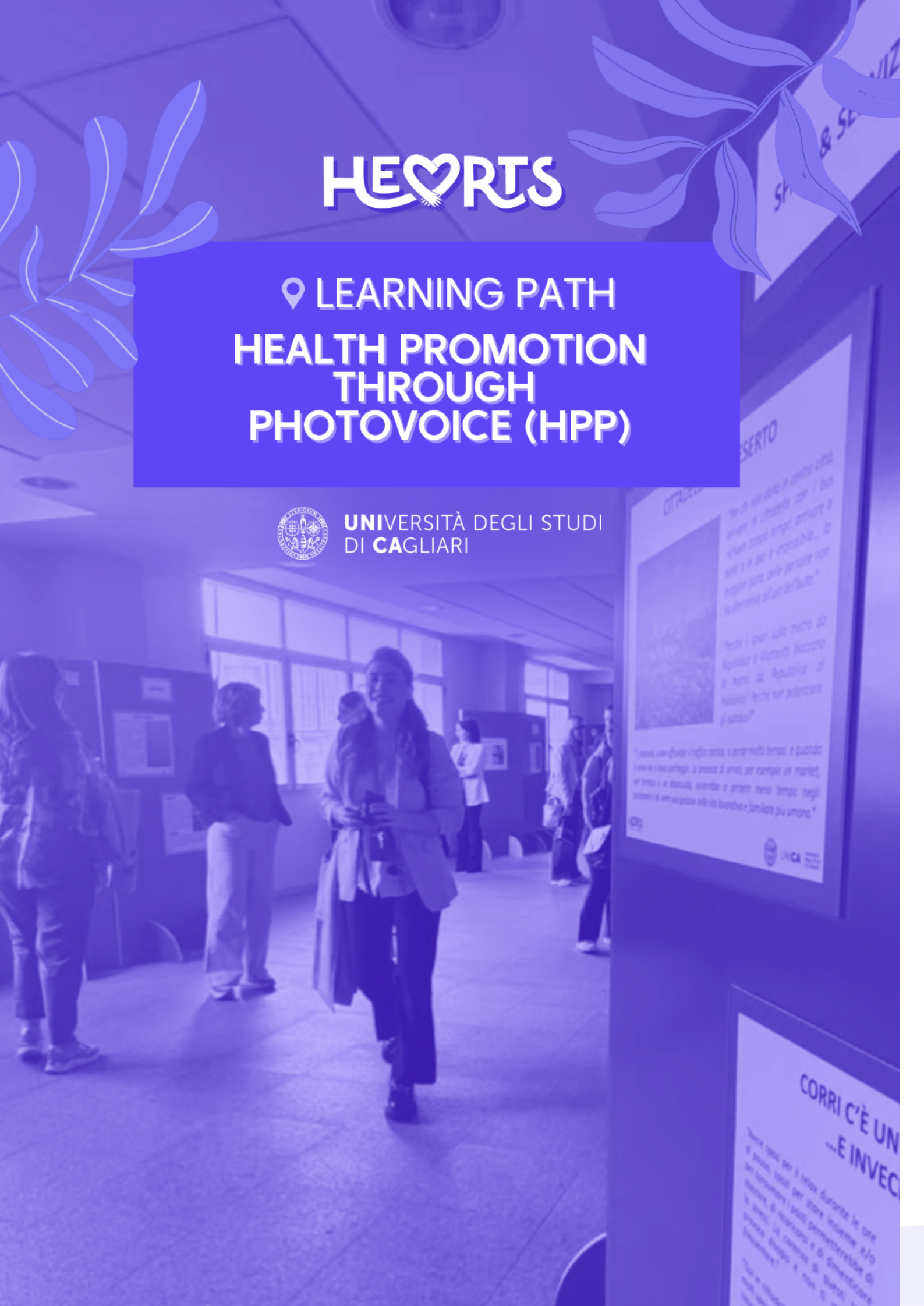
KEY ACTIVITY: **MINDFUL LISTENING, A JOURNEY THROUGH SOUND**

🎯 **Objectives**	➡ Cultivate **awareness of the present moment** and embodied experience. ➡ **Deepen understanding of emotional processes** and internal states. ➡ Strengthen skills in **emotional regulation** and self-reflection. ➡ Enhance the ability to **recognise and interpret sensory-emotional connections.**
⏰ **When**	Middle of Session one, after brief introduction to mindfulness
⏳ **Duration**	120 minutes
	Implementation
👁 **Preparation**	The activity should take place in a quiet, comfortable room with minimal distractions. A music playback device/ speakers/headphones and a pre-selected instrumental music track (ideally ambient music or guided mindfulness) are needed. Paper and pens for journaling should be provided.
👣 **Step-by-step Description**	The facilitator invites participants to sit comfortably and close their eyes if they feel safe, then leads a 2-minute breathing exercise. Then, they play the selected track, guiding participants to **listen with full attention**: • "Notice the different layers of sound..." • "What emotions, memories or images emerge?" After the track ends, the facilitator invites **quiet journaling** using prompts: • What did you notice in your body? • What feelings surfaced? • How did the music affect your sense of the present moment? The activity might also include group discussion and optional creative extension with sound-making or rhythm exercises.
💭 **Closing up**	The facilitator summarises key insights, emphasising the **use of music as a mindfulness anchor** and tool for emotional reflection.
🔄 **Variations and adaptations to different conditions of participants**	• Participants with **hearing impairments** may be offered tactile sound equipment or engage in visual/symbolic representations of sound and emotion. • Participants with **trauma histories** are given the option to step out or opt for a shorter, instrumental piece. • **Multicultural considerations** can be addressed by offering a choice of music styles reflective of participants' backgrounds.
💡 **Comments and hints for facilitators**	The facilitator should carefully select music that is non-triggering, non-verbal, and emotionally nuanced and **create a calm, open atmosphere** that values introspection and privacy, reminding participants they may opt not to share reflections aloud. They emphasise that there are no "right" responses; the goal is awareness, not analysis. Also, participants should be reminded that they may opt not to share reflections aloud.

HEARTS

LEARNING PATH

HEALTH PROMOTION THROUGH PHOTOVOICE (HPP)



UNIVERSITÀ DEGLI STUDI DI CAGLIARI

Health Promotion Through Photovoice (HPP)

Learning Path by University of Cagliari

General approach of the learning path

The Learning Path ***"Health Promotion through Photovoice"*** applies the community action strategy through the photovoice method to enhance knowledge of mental health needs and resources, and to advocate for it. This approach fosters community participation and commitment to create a supportive environment for mental health promotion.

Theoretical and methodological framework

The World Health Organization defines mental health as 'a state of mental well-being that enables people to cope with the stresses of life, realise their abilities, learn well and work well, and contribute to their community'. This definition emphasises the deep connection between **mental health and the living and working environment**, social networks, and economic and political conditions. Paraphrasing the Ottawa and Okanagan Charters, mental well-being can be created by students and staff within the everyday context of university life, where they learn, work, play, and love (WHO, 1987; IHPCN, 2005).

Consequently, the primary agents in promoting mental well-being are individuals and communities within their daily life contexts. Health promotion plays a crucial role in triggering community action by developing participatory processes where individuals and communities "actively engage in identifying their needs and available resources, making decisions, and defining mechanisms to address those needs" (WHO, 2021). This creates the conditions for "empowerment", i.e. **gaining control over the determinants of one's mental health**.

A key element in enhancing empowerment is the development of a **salutogenic orientation**, defined as the ability, in any situation, to focus on the aspects that generate health rather than those that generate illness, on the resources available and not only on the needs and criticalities. According to Aaron Antonovsky, the physician-sociologist who developed the theory of salutogenesis in the late 1970s, health and illness are opposite poles of the same continuum. Everyday life events induce a state of tension that leads people to move along this health continuum, and the direction - towards health or illness- depends on how individuals manage the tension (Mittelmark et al, 2022). The

key element influencing how people deal with the tension, is the "**sense of coherence"**, i.e. the ability to assess and understand life events, and to identify and mobilise the resources available to positively manage the change induced by the events themselves. The concept of resources includes not only material and economic goods, but also aspects of a spiritual, social, cultural, organisational, genetic and constitutional nature. In any situation resources are present, and the key to wellbeing is having the ability to identify and make the best use of them. The sense of coherence is an orientation that reflects the ability to interpret life events from a positive perspective and helps people to identify and utilise available resources, helping them to move along the health-disease continuum with an orientation towards health (Mittelmark et al, 2022).

In accordance with this theoretical framework, the "mental health photovoice" intervention was designed. The photovoice is a qualitative method based on the **"power of images"** (Wang & Burris,1997; Werremeyer et al, 2020). After a process of reflection, participants express their thoughts through photographs, each accompanied by a caption that briefly explains their ideas. The initial reflection process can be carried out using various participatory methodologies, such as focus groups or the World Café. These approaches are based on creating an informal and welcoming atmosphere that encourages the free expression of individual thoughts and stimulates open and constructive conversations. A final exhibition provides an opportunity for advocacy, allowing other stakeholders to understand the participants' perspectives and potentially triggering community action.

Photovoice, through its communicative power derived from the integration of images and narrative, enables an in-depth understanding of how the various factors that shape university life influence mental well-being. It brings to light the **needs, desires, and aspirations related to well-being** within the academic environment. This approach fosters a combination of individual and collective actions that translates into a **meaningful form of advocacy**. In fact, it contributes to building social acceptance and system-level support by stimulating shared reflection among members of the academic community, fostering mutual identification, dialogue, and a sense of belonging. Additionally, it helps to generate political commitment and policy support by offering decision-makers an authentic and direct insight into lived experiences, thereby facilitating the development of targeted and effective interventions. Participation in a photovoice project promotes mental well-being by **developing participants' confidence, autonomy, and control,** thereby enhancing empowerment. Additionally, it fosters social connections by bringing people together.

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Facilitator's professional profile and requirements

- ***Professional background***: health promoters, health psychologist, wellbeing experts.
- ***Skills:***
  - Understanding of social and cultural diversity.
  - Active listening skills.
  - Effective communication skills, including interpersonal communication and group work.
- ***Experience***:
  - experience in qualitative methods.
  - Experience in advocacy, collaborative working, community development including empowerment, participation and capacity building.

Health Promotion through Photovoice

Workshop 1 for Students: The Language of Images

Target group

From 15 to 25 students

Main objectives of the workshop

- ✓ Acquire knowledge about students' mental health in the university setting and **stimulate critical dialogue on significant community issues.**
- ✓ Encourage students to **take an active role in promoting mental health** within the university community.
- ✓ Empower individuals to comprehend and reflect on strengths and weaknesses in the university setting.
- ✓ Acquire communication skills and learning how to employ the power of images and words for an **advocacy action**.
- ✓ **Engage decision makers** with the aim of activating the change in favour of mental health.

Workshop itinerary

The workshop is organized into a total of 16 hours, segmented into 4 sections: the first two lasting 4 hours each, the third lasting 6 hours, and the fourth lasting 2 hours.

Session one begins with an introduction to the workshop, outlining its aims, rules, and the template for activities. Participants are required to agree on maintaining the confidentiality and privacy of all discussions throughout the workshop. To foster a positive and welcoming atmosphere, an icebreaking exercise is conducted. Following this, participants engage in the" dream exercise", imagining—almost as if in a dream—their ideal university, a place that truly aligns with their expectations and makes them feel at ease. The ideas generated from this activity serve as the foundation for a subsequent World Café activity. The facilitator sets up tables, each dedicated to a theme that emerged from the dream activity. Participants split into groups and engage in informal conversations about each theme. Over the course of the session, they rotate tables three times, with each discussion lasting fifteen minutes. At every table, one participant is designated to document key points from the conversation. In the final phase, all participants reconvene to present emerged insights and conclusions.

Session two opens with an icebreaking activity designed to foster engagement. For younger participants, a brief skill-based game serves as an effective way to build connections and set a positive tone: for example, students might be asked to arrange themselves in order —without speaking— according to the criteria provided by the facilitator (e.g., height, date of birth, shoe size, etc.).
Then, to ensure continuity, reflections from the World Café discussion are presented in a mind map, reinforcing key insights from the first session.

Following this, participants engage in a photovoice activity, a dynamic method that allows them to **use symbolic photographs to convey their perspectives on the needs and resources essential to their well-being** within the university setting.

Session three focuses on preparing materials for the **Photovoice exhibition,** ensuring a cohesive and impactful presentation. This process includes selecting and categorizing the most representative photographs for the final exhibition, designing presentation panels in PowerPoint, incorporating titles, images, and captions, compiling a list of key individuals, departments, and administrative offices to receive invitations for the exhibition opening.

Session four is dedicated to the realization of the final exhibition, providing an opportunity to engage the broader academic community and foster meaningful dialogue around the themes explored. At the end of the session, facilitator collects participants' feedback about the workshop.

KEY ACTIVITY: **PHOTOVOICE**

🎯 **Objectives**	➡ Deepen reflection on the strengths and weaknesses of the university setting for students' mental well-being. ➡ Learn to **represent concepts with symbolic images** and to write explanatory captions ➡ Develop **communication skills** for advocacy, focusing on promoting constructive ideas and avoiding accusations. ➡ Activate and develop **community-based approaches** and fostering a sense of belonging within the university setting.
⏰ **When**	In the second session of the workshop after the icebreaking activity.
⏳ **Duration**	240 minutes (4 hours)
	Implementation
👁 **Preparation**	To set the room for the session, arrange the chairs in a semicircle, ensuring all participants have a clear view of the images projected on the screen. Since translating one's idea of well-being in a university setting into a symbolic photograph can be challenging, it is essential to first introduce the Photovoice method. This can be done by displaying examples from literature, helping participants understand the concept and approach of photovoice. Next, the mind map is displayed onto the screen to remind them of the key themes that emerged in the previous session. This serves as a reference point, to ground participants in their reflections and to introduce the photovoice activity that encourages students' engagement to establishing a supportive atmosphere for promoting mental health.
👣 **Step-by-step Description**	Rearrange the seating—placing chairs in pairs—so participants can work collaboratively. Each pair selects both **positive and negative factors for students' wellbeing**, engages in a deep discussion about them, and determines how they can be visually represented through symbolic photographs. To guide their thinking, they can reflect on the following questions: How does this factor hinder or enhance students' well-being? What impact does it have on their daily university experience? How does it make students feel? To support their creative process, the facilitator can suggest various **approaches for capturing symbolism**, such as photographing objects, elements of nature, spaces, or more abstract representations like gestures, people from behind, smiles, hands, writing, or drawings. Objects can also be repositioned to enhance their expressive potential. Each pair can decide whether to remain in the room or explore the university environment to take their photographs. Once the allotted time has passed, participants return to the room to craft a title and caption for their image, encapsulating the meaning they wish to convey. To deepen their interpretation, they can use the **SHOWeD method** (Werremeyer et al., 2020), which involves answering guiding questions such as: What is depicted in the photo? Why did you choose this subject? In what way does this factor positively or negatively affect students' well-being in the university setting?

	Participants take photos using their mobile phones and then send them to the facilitator together with captions; it is important that the photos are sent by e-mail to ensure the quality of the images.
🔄 **Variations and adaptations to different conditions of participants**	The photovoice activity is designed to be inclusive and accessible for all participants. It is particularly well-suited for working with marginalized or disadvantaged groups, as the use of images helps overcome linguistic and cultural barriers. It also enables participants to express complex or sensitive experiences—such as trauma, discrimination, or social exclusion—that may be difficult to articulate verbally. Moreover, when conducted collectively, photovoice fosters connection among participants, encouraging empathy, mutual understanding, and solidarity.
💡 **Comments and hints for facilitators**	It is important throughout the activities to emphasize that photo caption on needs and resources for wellbeing is already a **way to activate the change** that will culminate with the advocacy triggered from the photo exhibition. The facilitator is responsible for orienting participants toward a salutogenic approach, ensuring captions remain constructive and non-accusatory. It should be clear that photovoice aims to stimulate improvement by highlighting the resources available in each context and promoting collective action and advocacy.

Health Promotion through Photovoice

Workshop 2 for Staff: Voices for Change, the Power of Advocacy

Target group

From 10 to 15 faculty members and administrative staff

Main objectives of the workshop

- ✓ Explore the participants' interpretation of the factors that affect their individual mental well-being in the University setting.
- ✓ **Encourage dialogue** between faculty members and administrative staff on well-being in the University setting.
- ✓ Engage participants in observing the University setting with the eye of **salutogenic approach** to activate the change in favour of well-being.
- ✓ Develop **communication skills for mental well-being** in the university settings.
- ✓ Bring participants' voices to the attention of academic decision makers.

Workshop itinerary

The workshop is organized into a total of 8 hours, segmented into 4 sessions, each one lasting 2 hours.

Session one includes the introduction to the workshop: aims, rules and template. Participants are required to agree on maintaining the confidentiality and privacy of all discussions throughout the session, fostering a safe and open dialogue. To create a welcoming and comfortable atmosphere, an icebreaking activity is conducted, helping participants build connections and ease into the conversation.

The discussion on the topic of well-being within the university setting is conducted using the Focus Group method. The conversation is facilitated by the moderator who poses four or five questions regarding the needs and resources for well-being in the university setting: What is well-being for you? What factors hinder/favour the achievement of your well-being at university? Does workplace well-being/malaise affect the private sphere and vice versa? What measures do you think could be taken to enhance the well-being of university staff?
Each question is addressed sequentially, with the facilitator ensuring that every participant had the opportunity to speak before proceeding to the next question. The entire conversation is recorded and subsequently transcribed.

Session two starts with a warming up designed to help participants recognize the expressive power of images. The subsequent activity consists in reflecting on and selecting a need and a resource that personally impacts staff's well-being within the university setting. Then participants write these, individually, on a post-it note. This exercise serves as a preparatory step for the next exercise, where participants will translate their selected factors into two or three symbolic photographs using the Photovoice method. Through this process, participants visually express how several factors shape well-being in the university environment.

Session three is dedicated to write the title and to craft captions that accompany each photo, thereby creating a meaningful combination of visual and textual elements.

Session four starts with an icebreaking and is dedicated to the organisation of the photovoice exhibition. Participants refine all aspects of setting up the exhibition and plan for opening day: choosing a title for the photovoice exhibition, identifying the most suitable venue, establishing how to display photovoice panels, preparing invitations, and deciding how to gather feedback from visitors.

At the end of the session, facilitators collect participants' feedback about the workshop.

KEY ACTIVITY: **ADVOCACY THROUGH THE PHOTOVOICE EXHIBITION**

🎯 **Objectives**	➡ Foster **collective action and advocacy** to promote empowerment within the university community. ➡ Disseminate workshop outcomes and draw attention towards the themes for well-being in the university setting. ➡ **Encourage critical dialogue** amongst all stakeholders of the university community. ➡ **Promote policy and social changes** through community action and advocacy to foster a university setting that supports mental well-being.
⏰ **When**	In the last session of the workshop, after the icebreaking activity.
⏳ **Duration**	90 minutes
	Implementation
👁 **Preparation**	Prepare the room, arranging five tables with chairs to create small groups, each of which is marked by a topic of discussion.
👣 **Step-by-step Description**	Participants change tables three times to maximize the interaction of ideas. Tables are characterized by the following topics of discussion: • **Table 1** dedicated to **defining an appealing title for the photovoice exhibition** and finding the most suitable venue (a place habitually frequented by different members of the academic community, students, academic faculty and administrative staff). • **Table 2** dedicated to **defining the invitation card and the invitation list** for the photovoice exhibition. The card should have an attractive graphics and a brief but comprehensive content to describe the project and it should indicate the location, the date, and the time of the inauguration day. The guest list should include all key stakeholders for advocacy.

- **Table 3** dedicated to defining the **roles that participants could play** on the opening day of the photovoice exhibition: **Presenter**, the one who describes the project and the aim of the photovoice exhibition.
    - **Welcoming Guests**, the host who greets visitors, making them feel comfortable and appreciated.
    - **Guide**, the one who offers insights into the photographs and the themes of the exhibition, this can include answering questions and adding explanations.
    - **Feedback coordinator**, the one who has the role of gathering visitors' opinions and experiences to assess the impact and success of the exhibition.

- **Table 4** dedicated to defining how to **collect visitors feedback on the inauguration day** and as long as the exhibition remains installed. For example, you can ask visitors the same questions asked in the workshop: What factors hinder your well-being at our university? What factors promote your well-being at our university? It could be useful to set up an area with a table and a book note where visitors can write their comments. Alternatively, you can ask them to write their feedback on post it notes, which must then be placed in a box. Otherwise, you can use social media and the exhibition's website to invite visitors to share their thoughts online.
- **Table 5** dedicated to defining how to **showcase the exhibition through social media**. Here are some examples: Post real-time updates, photos, and short videos of the event, showcasing the atmosphere and key moment; Use Instagram and Facebook Stories to share quick, engaging content and encourage followers to participate by asking questions or sharing their thoughts; Create interactive content such as virtual tours.

Closing up

The facilitator collects the key points of the discussions and submits the proposals that emerged at the tables for the participants to vote on. The proposal with the most votes will be the one that will be used for the realization of the photovoice exhibition.

The **opening day of the exhibition** should be thought of as a joyful, satisfying time for all workshop participants, but also as **a starting point for disseminating ideas for a university that thinks about the well-being of all its members**, inclusive and oriented toward participation and increasing a sense of belonging.

🔁 **Variations and adaptations to different conditions of participants**	The activity is basically inclusive. Recordings can be made to describe the content of each photovoice panel, for people who are visually impaired or have difficulty with vision or reading.
💡 **Comments and hints for facilitators**	At the beginning of the activity, the facilitator stresses the importance of the exhibition being inclusive, participatory and sustainable. Organizing a photovoice exhibition is certainly complex; there are many skills and energies that need to be brought to bear. Support from various stakeholders is needed. Creativity is an important element in line with the characteristics of photovoice; the more successful one can be in being creative, the more effective advocacy will be. At the end of the activity, **the evaluation of the exhibition's success comes from its advocacy power**. Feedback will come from the degree of visitor participation and the attention it has attracted from decision makers.

Health Promotion through Photovoice

Workshop 3 for Students and Staff: Perspectives in Dialogue

Target group

From 15 to 20 University students, faculty members, administrative staff.

Main objectives of the workshop

- ✓ Develop knowledge on **needs for collective mental well-being** in the university setting.
- ✓ **Develop a salutogenic mindset** oriented towards identifying and strengthening the assets available to promote collective mental well-being.
- ✓ **Understand the plurality of viewpoints on mental wellbeing** to value and mediate between different perspectives.
- ✓ Acquire skills to effectively **communicate needs and resources** for collective mental well-being promotion in the university setting.
- ✓ **Develop commitment and competencies to advocate for mental well-being** promotion and thus triggering a community action process, involving the wider university community and stakeholders with decision-making power.

Workshop itinerary

The workshop is composed of 8 hours, articulated in 4 sessions of 2 hours.

Session one includes the presentation of the workshop's objectives and participants, the establishment of confidentiality agreements for shared information, an icebreaking exercise to foster a friendly atmosphere and the key activity 'Different yet the same', which focuses on identifying the needs and resources for collective well-being from the perspectives of the different involved stakeholders. The results of this activity, summarized in a mind map, will be a baseline reference for the activities of the next two sessions.

Session two includes an icebreaker to help participants experience the communicative power of images, a presentation of the mind map summarizing concepts from the previous meeting, and the initiation of a collective photovoice project on the most significant needs and resources for the mental well-being of the entire academic community. In this session, the photovoice activity primarily focuses on representing these concepts through symbolic photographs taken by the participants.

Session three focuses primarily on writing captions that, using a narrative approach, will accompany each photo, creating a synergy between the power of images and words. At the end of the session, participants discuss the organizational aspects of the final exhibition.

NUTRIMENTO È CRESCITA
"È stimolante e sfidante non fare sempre le stesse cose. Fa provare un senso di autoefficacia, fa sentire di saper fare, è motivante, è una fonte di piacere."
"Non c' è mai un giorno uguale all' altro, e si imparano cose nuove. Si trae soddisfazione dal proprio lavoro."
HEARTS
L'UNIVERSITÀ È VITA
AUTOEFFICACIA

Session four is dedicated to the organization realization of the final exhibition, which will foster the engagement of the wider academic community. At the end of the session, facilitator collects participants' feedback about the workshop.

KEY ACTIVITY: **DIFFERENT YET THE SAME**

🎯 **Objectives**	➡ Develop awareness of **needs and assets for mental wellbeing** in the university context. ➡ Develop a **salutogenic asset-based approach**. ➡ Foster **empathy**.
⏰ **When**	In the first session of the workshop, after the icebreaking.
⏳ **Duration**	90 minutes
	Implementation
👁 **Preparation**	Prepare the room by setting up three discussion areas, each dedicated to one of the involved categories (students, faculty, and administrative staff). Arrange chairs in a circle, with the number of chairs matching the number of participants in each category. For the results sharing and final reflection, all participants will collaborate to move the chairs into a single semicircle.
👣 **Step-by-step Description**	The facilitator asks participants to divide into the three categories (students, faculty, and administrative staff) and position themselves in their designated areas to work in subgroups. Each subgroup receives a sheet with the question, *"In everyday university life, **which factors influence, positively or negatively, the well-being** of your category?"*. Their task is to share and write a list of key concepts. After about 15-20 minutes, each group receives two additional sheets with the same question but referring to the well-being of the other two categories (e.g., "In everyday university life, which factors influence, positively or negatively, the well-being of the students?"). The group must put themselves in the shoes of the other categories to express what they think their wellbeing determinants might be, noting the key concepts on the corresponding sheets (about 25-30 minutes). Next, the completed sheets are hung in a visible location, ensuring that sheets referring to the same category are placed next to each other. The **collective discussion** then focuses on one category at a time. Participants of one subgroup first share the factors they identify as determinants of their own well-being (e.g., students), followed by the perspectives on them by the other subgroups (e.g., faculty and administrative staff). The facilitator highlights the extent to which each category understands and perceives the well-being of the others.
💭 **Closing up**	After completing this overview, the facilitator triggers a final collective **reflection on the common factors between the different categorie**s and the ways in which each category can influence the well-being of the others.

🔄 **Variations and adaptations to different conditions of participants**	The activity is inclusive and sustainable for all types of participants, regardless of their specific physical, cultural and social conditions.
💡 **Comments and hints for facilitators**	At the beginning of the activity, the facilitator defines mental wellbeing, emphasizing that this concept goes far beyond the mere absence of pathologies, and references the WHO definition. The facilitator should clearly state from the outset that the activity is intended to bring out the experiences and perspectives of different stakeholders on a shared topic. It is essential to emphasize that even contrasting opinions must be welcomed and respected—not as attributions of blame or responsibility, but as valuable contributions for identifying areas for improvement and opportunities for collective growth. At the end of the activity, the facilitator highlights the importance of reflecting on both the **factors that negatively and positively influence mental well-being**. Reflecting on negative factors not only helps identify needs but also has a cathartic effect, promoting mental wellbeing. Recognizing that others experience the same problems fosters a sense of understanding and counters feelings of loneliness. Acknowledging that the same factor can have different impacts on different people reminds us that there is always another side to the coin, and that dialogue is key to wellbeing. On the other hand, reflecting on positive factors helps develop a salutogenic orientation, encouraging people to look beyond negative aspects and focus on the resources, both material and immaterial, that exist in every context. When these resources are recognized and appropriately valued, they trigger changes that create environments supportive of mental well-being.

HEARTS

ICEBREAKERS, WARM-UPS AND CLOSING ACTIVITIES

Icebreakers, Warm-Ups and Closing Activities

Icebreakers and warm-ups

These activities serve to build trust, reduce initial tension and foster a sense of connection and openness within the group. They help participants arrive both physically and emotionally, preparing them for deeper engagement.

Activities

- Welcoming Diversity
- Ephemeral Visual Poem
- Find your Safe Space
- Yarn Ball
- Create a Creature
- Room Reconfiguration

Closing activities

The final activity offers a moment to consolidate the experience, release emotional tension and support integration. It often includes symbolic or reflective elements that help participants transition out of the session with a sense of closure and continuity.

Activities

- Among Us, a circle
- Closing Ritual - Around the Tree

ICEBREAKER ACTIVITY: **WELCOMING DIVERSITY**

🎯 **Objectives**	➡ To **welcome diversity** in all its forms, in an explicit and conscious way, recognising the different axes of identity present in the group. ➡ To name personal experiences and diverse backgrounds, creating **a space of inclusion, listening and belonging**. ➡ To foster an environment where all people, with their visible and invisible differences, feel seen and legitimised.
⏰ **When**	At the beginning of a group session or process, as a transition towards more in-depth work
⏳ **Duration**	20 minutes
👣 **Implementation**	• The group stands in a circle. The facilitator stands in the centre and suggests imagining that each person carries a symbolic backpack on their back, loaded with experiences, stories, wounds, fears, learning and strengths. • The group is invited to turn around, with their backs to the centre, in order to symbolically make visible those backpacks that are not normally seen.

	• From the centre, the facilitator expressly names and acknowledges the different axes of diversity that can inhabit the group:
	  ○ "We welcome all ages: those who have accumulated years of experience, and those who are just beginning their journey."
	  ○ "To those who have migrated, to those who have had to reinvent themselves, to those who have cared in silence."
	  ○ "To those who live with a mental health disorder, with chronic pain, with doubts they dare not yet name."
	  ○ "To those who have been singled out for how they dress, who they love, how they speak, their body, their background, their class, their history."
	  ○ "To those who have arrived in joy, and to those who have made an enormous effort just to be here today."
	• After a silent pause, they are invited to turn again. The circle opens again. It is acknowledged that the group does not start from a neutral point, but from a living diversity, which today has been welcomed and named.

💡**Comments and hints for facilitators**	• You can adapt the phrases according to the context (age, cultural background, type of group). • If possible, review the composition of the group in advance and reflect on the diversity present. Take into account those issues that are more invisible or sensitive (grief, mental health, migration, gender identity, etc.) and adapt the activity carefully. The aim is not to stir things up for the sake of it, but to name issues respectfully in order to enable recognition. • Consider that there are people who may be carrying stories that they do not feel ready to be heard or addressed. Ensure that acknowledgement does not become exposure.

ICEBREAKER ACTIVITY: **VISUAL POEM**

🎯 **Objectives**	➡ Facilitate the transition to an inclusive group space, stimulating the presence and initial bonding between participants. ➡ **Activate creativity and sensory connection** through a symbolic and accessible experience. ➡ Establish **a bridge between the inner world and the natural environment**, favouring a reflective and open disposition.
⏰ **When**	Beginning of the workshop or session, as a *warm-up* to prepare the body and mind before a central activity that requires attention, introspection or expression.
⏳ **Duration**	15-20 minutes
👣 Implementation	• Invite the group to an outdoor or indoor environment with natural elements or accessible materials.
	• Each person collects between 2 and 5 objects (leaves, twigs, stones, paper, everyday items). • With these elements, individually create **a "visual poem" that represents your state, emotion or thought at that moment**. • It can be closed with a round where whoever wishes can share a word, a gesture or simply observe in silence.

💡Comments and hints for facilitators	• This activity is based on the tradition of visual poetry as an artistic, pedagogical and community practice. • It can be adapted with tactile materials, objects in contrasting colours or alternative formats according to the needs of the group. • It creates a respectful atmosphere, without interpretation or judgement of the creations.

ICEBREAKER ACTIVITY: **FIND YOUR SAFE SPACE**

🎯 **Objectives**	➡ Promote awareness of how physical spaces can influence our emotional well-being. ➡ **Promote a personal and symbolic connection with the university environment** as a potential space of refuge and care. ➡ Establish an **emotional base of security** prior to activities that require openness or vulnerability.
⏰ **When**	At the beginning of a workshop, especially useful for sessions that focus on environmental care, identity or emotional resilience.
⏳ **Duration**	20-30 minutes (including travel and pick-up)
👣 **Implementation**	• Explain to the group that they are going to do a short exploration of the campus or the surrounding area in search of their "safe space". • Invite them to walk calmly for a few minutes, observing where they feel calm, protected or connected. Ask them to notice where they tend to go when they are not feeling well and reflect on what they usually do in those moments. • Once they find it, they should take a photograph of it (it can be taken with their mobile phone). • Then, they write a short phrase or word that expresses why they chose that place or what inspires them. • When they return to the group, they may optionally share their image and phrase. Some of the images can be projected if a projector is available. • Invite to reflect. **A "safe space" is not always a physical location**: it can also be a person, a practice, a memory or even an internal feeling. This helps to broaden the experience, especially if someone hasn't found a specific place or doesn't fully feel welcomed by their surroundings.
💡 **Comments and hints for facilitators**	• Remember that there are no right answers; the safe space can be a bench, a tree, a staircase, a corner of a building or next to a friend having a coffee.... • Make sure the activity is accessible to everyone: those who cannot move can use their own images or describe a remembered space.

Some Examples

The UAB lawn brings peace of mind in times of stress. Better if it is in good company.	*An emergency exit reminds me that, even in chaos, there is always a safe way out and to safety. There is always an alternative way out of trouble.*	*When I'm not feeling well, I like to sit on these benches, listen to music, and disconnect from the world. Being surrounded by nature comforts me and helps me forget my problems.*

ICEBREAKER ACTIVITY: **YARN BALL**

🎯 **Objectives**	➡ **Build trust and support** among university staff, creating a safe environment for sharing experiences related to workplace stress and emotional well-being. ➡ Foster **a sense of interconnection and collective care**, encouraging participants to recognize shared challenges and support networks within the university context. ➡ Promote **emotional openness and vulnerability** in a non-judgmental setting, enabling staff to discuss mental health concerns, such as stress or burnout, with greater ease. ➡ Reinforce the importance of **active listening and empathetic engagement** as tools for addressing workplace dynamics and promoting mental health.
⏰ **When to do the activity**	Beginning (warm-up activity) or end of the session (closing ritual).
⏳ **Duration**	20–30 minutes, depending on the number of participants.
👁 **Preparation**	• One large ball of yarn (preferably colourful and soft-textured) and optionally a pair of scissors. • An open space where participants can form a seated or standing circle. • Ensure all participants can see and hear each other comfortably. • Prepare a brief facilitator introduction to frame the activity as a step toward building trust for discussing workplace stress and mental health.
👣 **Implementation**	

- Explain to the group that they are going to do a short exploration of the campus or the surrounding area in search of their "safe space".
- Invite them to walk calmly for a few minutes, observing where they feel calm, protected or connected. Ask them to notice where they tend to go when they are not feeling well and reflect on what they usually do in those moments.
- Once they find it, they should take a photograph of it (it can be taken with their mobile phone).
- Then, they write a short phrase or word that expresses why they chose that place or what inspires them.
- When they return to the group, they may optionally share their image and phrase. Some of the images can be projected if a projector is available.
- Invite to reflect. **A "safe space" is not always a physical location**: it can also be a person, a practice, a memory or even an internal feeling. This helps to broaden the experience, especially if someone hasn't found a specific place or doesn't fully feel welcomed by their surroundings.

💭 Closing up

- Optionally, you can cut parts of the web to show how the same network that supports it can also break.
- As a final step, the group is encouraged to carefully place the web on the floor in the center of the room, allowing its interconnected pattern to visually accompany the group throughout the session, symbolizing the enduring presence of their shared support network.

💡**Comments and hints for facilitators**	• For participants with reduced mobility, the yarn can be passed hand-to-hand or gently rolled across a table. • For participants with social anxiety, a history of trauma, neurodivergent conditions or any other circumstance not listed here that may limit their ability to engage with this activity or its content, participation can remain non-verbal and pressure-free. They may choose to express themselves through a silent gesture or simply hold or pass the yarn without speaking. • Start the activity with a calm tone and slow rhythm to set a reflective atmosphere. • Offer a clear example of the type of sharing that is expected (light, safe and non-invasive). • Keep the circle inclusive: if someone doesn't want to participate, respect their space without singling them out. • Consider using this activity with different prompts when used as a warm-up (e.g "Share one word that describes your mood", "Name something that helps you recharge at work."...)

ICEBREAKER ACTIVITY: **CREATE A CREATURE**

🎯 **Objectives**	➡ Activate **collective creativity** and play as a gateway to group work. ➡ Encourage teamwork from a playful and inclusive approach. ➡ Relax the atmosphere and generate a safe and fun first interaction.
⏰ **When to do the activity**	Start of the workshop, ideal as a *warm-up* for sessions involving cooperation, artistic expression or group dynamics.
⏳ **Duration**	15-20 minutes
👣 **Implementation**	 • Explain to the group that they are going to do a short exploration of the campus or the surrounding area in search of their "safe space". • Invite them to walk calmly for a few minutes, observing where they feel calm, protected or connected. Ask them to notice where they tend to go when they are not feeling well and reflect on what they usually do in those moments. • Once they find it, they should take a photograph of it (it can be taken with their mobile phone). • Then, they write a short phrase or word that expresses why they chose that place or what inspires them. • When they return to the group, they may optionally share their image and phrase. Some of the images can be projected if a projector is available. • Invite to reflect. **A "safe space" is not always a physical location**: it can also be a person, a practice, a memory or even an internal feeling. This helps to broaden the experience, especially if someone hasn't found a specific place or doesn't fully feel welcomed by their surroundings.
💡 **Comments and hints for facilitators**	• Make sure that descriptions are inclusive, fun and open to symbolic imagination. • It gives options for human statues to be made without physical contact: groups can use space and posture without touching each other.

ICEBREAKER ACTIVITY: **ROOM RECONFIGURATION**

🎯 **Objectives**	➡ Enable each person to explore how they wish to position themselves in the environment, according to their status and needs. ➡ Stimulate a collective reconfiguration of space that **supports a safe and inclusive learning environment**.
⏰ **When**	Carry out this activity at the beginning of the workshop, as a first contact with the room, before any core activity.
⏳ **Duration**	15-20 minutes
👣 **Implementation**	• Invite the group to move freely around the space, observing how they feel at different points in the room. • Name key words that connect to the theme of the next *core activity* (e.g. "refuge", "passion", "community", "boundaries", "listening"). • Ask each person to respond from the body: changing the rhythm, direction, posture or positioning. Allow time for free exploration. • Invite the group to create the configurations they **collectively feel best** as this is how the distribution will look during the session. • Once they find a layout they like, ask them: "Is this OK?", "Do you like this layout?", "Can we start here? Adjust if necessary until a consensus is reached.
💡 **Comments and hints for facilitators**	• Verify that the space is accessible, safe and easy to move/displace. • Offer the possibility to participate without moving or to express themselves from where they already are. • Don't force bodily responses, encourage free and non-judgmental exploration.

CLOSING ACTIVITY: **AMONG US, A CIRCLE**

🎯 **Objectives**	➡ Closing the session with **a symbolic gesture of connection**, where each person leaves an intangible trace of what they have experienced. ➡ To create a common "container" of **collective learning and resonance**, supported corporeally and emotionally by the group.
⏰ **When to do the activity**	At the end of a session or workshop, especially after a central activity with a strong emotional or symbolic charge.
⏳ **Duration**	15-20 minutes
👣 **Implementation**	 • Invite everyone to form a circle. Each person places their thumbs touching the thumbs of the people next to them, thus forming a kind of collective "container" between all the hands.In silence, you are invited to take a deep breath together. • In silence, you are invited to take a deep breath together. • If you wish, you can say aloud **a word, phrase or image that represents what you take away from the session**, while with the hand that is not forming the container you symbolically evoke the concept and release it into the shared space. You can also simply remain silent and make a symbolic gesture with your hands.

- The facilitator can close by expressing gratitude for the joint construction of the space, naming the "container" as a symbolic place where shared experiences and learning are stored.

💡Comments and hints for facilitators

- It validates all forms of participation: verbal, gestural, silent.
- You can accompany the moment with soft music if desired.

CLOSING ACTIVITY: **AROUND THE TREE**

🎯 **Objectives**	➡ Close the process by **acknowledging the personal and collective roots that have sustained the shared experience**, inspired by the principle "no roots, no wings", a concept developed by Bertold Ulsamer in his book of the same title, rooted in Bert Hellinger's systemic therapy. ➡ Connecting the learning and emotions of the workshop with **symbolic images of nature**, generating a deep and respectful experience of closure with each individual trajectory.
⏰ **When to do the activity**	At the end of the workshop or group process, especially when you want to consolidate a deep reflection or leave a lasting emotional imprint.
⏳ **Duration**	15-20 minutes
👣 **Implementation**	• If possible, do the activity outdoors, around a real tree. If not, you can use a potted plant, a picture, a symbolic plant or a representation of a tree in the centre of the room. • Form a circle around the tree or natural symbol. • Invite the group to **imagine that this tree represents the lived process**: its roots are the previous experiences, the support received, the people who have accompanied us; its trunk is the path shared in the workshop; its **branches and leaves are the learnings, desires and possible futures**. • Each person, optionally, can approach the tree and deposit a gesture, word, stone, leaf or symbol that represents what they take away or what they want to honour from their prcess.

	• You can close by saying: "No roots, no wings", giving thanks for what has been sown and recognising the value of all that has made the growth experienced possible.
💡**Comments and hints for facilitators**	• It accompanies the process with sensitivity, respecting silences and offering a closure that is integrative and emotionally caring. • You can offer natural elements to symbolise the offering (stones, dried leaves, flowers...).

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